



TRADEMARK RETAINER INSTRUCTIONS:

1. Print and complete the *Fee Agreement* (page 2)
2. For a federal trademark application, also complete the *Trademark Data* form (page 3)
3. Mail or fax the forms along with payment (see payment instructions below)

FEE AGREEMENT

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THE CLIENT: _____, retains attorney ERIK M. PELTON, (“Attorney”), for representation as pertaining to:

- Application for registration of a trademark in the U.S. Patent and Trademark Office (\$850 per application)**
Includes: a basic search of the USPTO records, telephone and written responses to Office Actions, Refusals and Requests for Amendments.
- Comprehensive trademark search, analysis and report (\$500)**
(if chosen, the comprehensive search will be completed prior to proceeding with application)
Includes: search of federal, state, business, internet and domain name databases; written analysis by attorney.
Name to be searched: _____
- Expedited services (\$200)**
Includes: Application filing within 2 business days; Comprehensive search report within 5 business days

Service fees checked above shall be due upon the signing of this agreement. Costs such as mailing, copying, and telephone calls are included in the flat rates. The application fees do not include the U.S. Patent and Trademark Office filing fee, generally \$325 for each application, which Client will provide to attorney.

Client understands that there are no guarantees regarding the success of Attorney’s efforts and Client authorizes Attorney to employ counsel, agents or experts on its behalf. The Client understands that any additional work requested by Client, such as Appeals, research, and renewals shall be billed at the hourly rate of \$275.00 for time actually devoted to the service of Client, together with reimbursement for all expenses pertaining thereto.

SIGNED on this _____ day of _____, 20__.

Client Signature

Attorney Signature

Print Name: _____

Title: _____

PAYMENT:

_____ **Credit Card**
(circle one: Visa AmEx M.C.)

Card #: _____

Exp. Date: _____

Name on Card: _____

Billing Address: _____

_____ **Check**

Make check payable to:
Erik Pelton, Attorney at Law
[include USPTO filing fee if appropriate]

mail check and signed agreement to:
Erik M. Pelton, Esq.
P.O. Box 100637
Arlington, VA 22210

TRADEMARK DATA FORM

If TM is owned by a BUSINESS:

Name of Company:

Name of Contact Person:

Corporate Form (Partnership, LLC, Corp., etc.):

State of Incorporation/Organization: _____

If TM is owned by an INDIVIDUAL:

Name:

Citizenship:

Address: _____

City/State/Zip: _____

Telephone: _____

Fax: _____

Email: _____

Web Site: _____

Trademark(s) to be Protected: _____

(If trademark is a logo, please describe the logo and attach a copy)

Trademark First Used in Commerce (Day/Month/Year): _____

Trademark First Conceived (Day/Month/Year): _____

Goods or Services the Trademark is Used to Promote/Sell:

