

# WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS (WDFI)

## TRADEMARK FILINGS

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User Guide – Online User – Trademark Filings

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“Mark” means a label, trademark, trade name, term, design, pattern, model, device, shopmark, drawing, specification, designation or form of advertisement that is adopted or used by any person to designate, make known or distinguish any goods or service as having been made, prepared or provided by that person and that is registered by that person under s. 132.01.

TIPS:

- Each image, logo, phrase or name must be a separate application and fee
- Decide if ‘applicant’ will register as an individual or under an entity.
- Must know which 2-digit classification of goods and services you will file under (Please see guide here)
- You must enter a date of first use (can’t be more than 30 days in the future)
- When registering an image/logo you must describe fully as though we can’t see it and upload the image you described in the designated area of the application. If you are NOT registering an image/logo you should skip ‘Upload Mark’ area
- When registering name/phrase enter only the words you want to Trademark in the trademark description area of the application
- Must be able to print application to get notarized and then scan and upload as a pdf (if notary has an embossing seal please shade/ink before you scan for upload)

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# 1 Online Trademark Filings

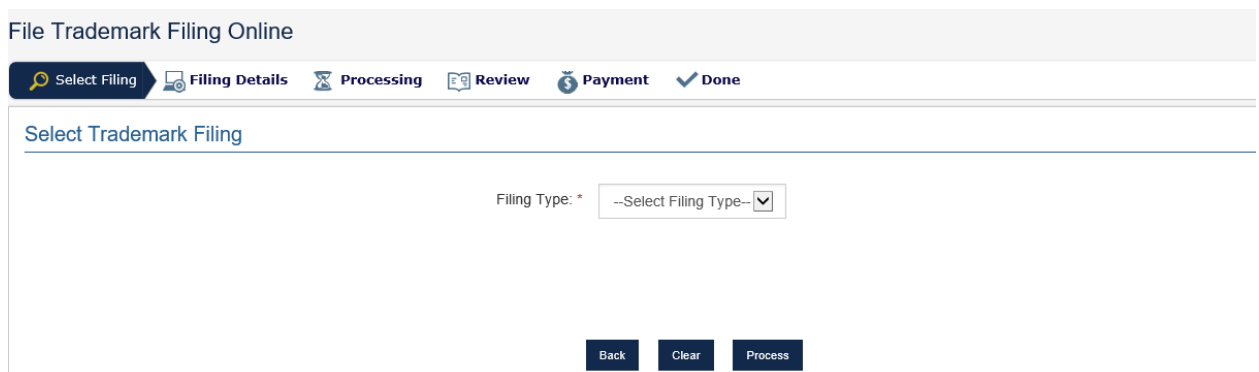
All of the available online Trademark filings may be accessed from the Trademark header menu.





**NOTE:** You must register, amend, assign, renew or cancel each mark separately. Example: If you have a 'name' & 'logo' to register these must also be done separately.

1. Select **Trademark > Trademark** to begin a filing.

The system displays the File Trademark Filing Online screen.



2. Select the desired filing from the **Select Filing** drop-down menu.
3. Select the desired filing type from the **Filing Type** drop-down menu.
4. Complete one of the following...

If...	Then...
The user selects a registration...	Click the  button to proceed to the next screen.
The user selects a subsequent filing or copy request...	<ol style="list-style-type: none"> <li>1. Search for the desired filing.</li> <li>2. Click the  button to proceed to the next screen.</li> </ol>

## 1.1 Trademark Registration

The initial processing screen for Trademark Registrations allows the user to enter information about the applicant and mark.

The screenshot shows the 'Trademark Registration' form on the State of Wisconsin Department of Financial Institutions website. The page header includes the state logo, the department name, and the slogan 'Strengthening Wisconsin's Financial Future'. The user is identified as JENNIFER BOOKE on Tuesday, March 31, 2022. The navigation menu includes Dashboard, Search, UCC, Trademark, Personalization, and Subscriptions. The form is titled 'Trademark Registration' and includes a progress bar with steps: Select Filing, Processing, Review, Payment, and Done. The form is divided into several sections: Applicant Information, Business Address, Mailing Address, 3rd Party Address, Trademark Description, and Upload Mark. The Applicant Information section includes a Business Type dropdown (Entity selected), an Entity Name field, and a Business Address section with fields for Attn, Address Line 1, Address Line 2, Country (United States), City, State (Wisconsin), Zip Code, and Email. The Mailing Address section is optional and includes similar fields. The 3rd Party Address section is also optional and includes fields for Attn, Address Line 1, Address Line 2, Country (United States), City, State (Wisconsin), Zip Code, and Email. The Trademark Description section includes a large text area for the name or phrase to be registered, a Date of First Use field (03/31/2020), and a Classification of Goods or Services dropdown. The Upload Mark section includes a note about uploading images and a file selection area with 'Select File' and 'Upload' buttons.

State of Wisconsin Department of Financial Institutions  
Strengthening Wisconsin's Financial Future

JENNIFER BOOKE  
Tuesday, March 31, 2022

Dashboard Search UCC Trademark Personalization Subscriptions Logout

Trademark Registration

Select Filing Processing Review Payment Done

Trademark Registration

Applicant Information

Business Type:  Entity  Sole Proprietor  Applicant Same as Filer

Entity Name:

Business Address:

Attn:

Address Line 1:

Country:

City:

Email:

Address Line 2:

Zip Code:

State:

Phone:

Mailing Address  If different than Business Address

Attn:

Address Line 1:

Country:

City:

Address Line 2:

Zip Code:

State:

3rd Party Address  Same as Filer

Attn:

Address Line 1:

Country:

City:

Email:

Address Line 2:

Zip Code:

State:

Trademark Description

Name or phrase to be registered OR detailed description of image or logo (See instructions for details):\*

Date of First Use:

Classification of Goods or Services:

Upload Mark

If you are registering an image, logo, label, design, pattern, model, device, shopmark or drawing upload an image of it here.

Select file to upload (Max 10MB) Fillable PDFs must be flattened before submission, see instructions for details.

**Trademark Description**

Name or phrase to be registered OR detailed description of image or logo (See instructions for details):\*

Date of First Use\* 03/31/2020

Classification of Goods or Services\* -- Select --

**Upload Mark**

If you are registering an image, logo, label, design, pattern, model, device, shopmark or drawing upload an image of it here.

Select file to upload (Max. 10MB) Fillable PDFs must be flattened before submission, see instructions for details.

Select File Upload

**Contact**

Contact Name:

Contact Phone:

Contact Email:

**Signer**

Printed Name:\*

Title:\*

Back Continue

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1. Complete the **Applicant Information** section.

The user may select **Entity** or **Sole Proprietor** for the Business Type. The name fields will update based on this selection.

**NOTE:** The user may select the **Applicant Same as Filer** checkbox to automatically populate the **Applicant Information** and **Business Address** sections with the filer's information.

2. Complete the **Business Address** section.

The system will complete the **City** and **State** fields automatically based on the zip code.

3. Complete the **Mailing Address** section as necessary.

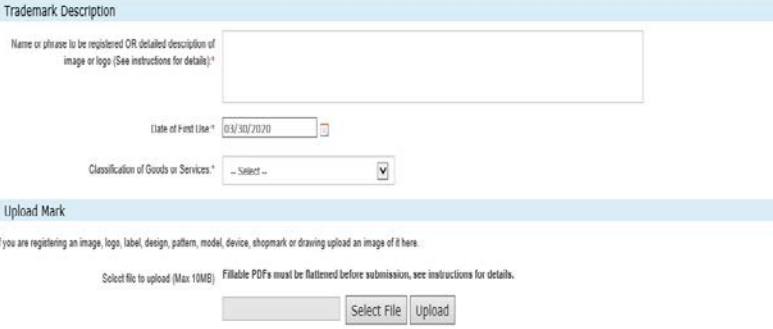
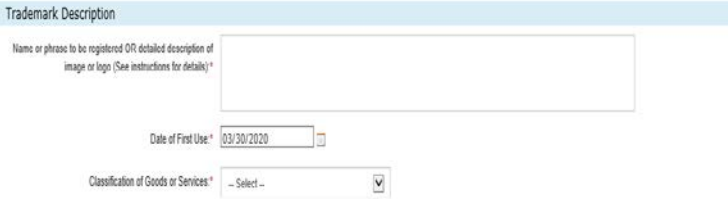
The Mailing Address section is inactive by default. The user may select the **'if different than Business Address'** check box to activate these fields and complete them as necessary.

4. Complete the **3<sup>rd</sup> Party Address** section.

The system will complete the **City** and **State** fields automatically based on the zip code.

**NOTE:** The user may select the **Same as Filer** check box to automatically complete the fields with the filer's information.

5. Complete one of the following...

If...	Then...
The user is registering a trademark...	<p>1. Complete the <b>Trademark Description</b> section.</p> <p>2. Upload an image of the mark.</p> 
The user is registering a trademark without an image...	<p>Complete the <b>Trademark Description</b> section (don't upload an image).</p> 

6. Complete the **Contact** section.

7. Complete the **Signer** section.

8. Click the  button.

The system displays the **Review Filing** screen

## 1.2 Trademark Amendment

The initial processing screen for Trademark Amendments allows the user to amend address information for the selected Trademark.



\* - Required Field

Trademark Amendment

Instructions

Select Filing Processing Review Payment Done

Trademark Amendment

Trademark Information

ID: 20131441510 Date of first use:  
 Status: Active Classification of Goods or Services: 46-LEGACY  
 Registration Date: 03/06/2013 Expiration Date: 03/06/2023  
 Description: STACKS MARKETING

Applicant Information

Type: Entity  
 Entity Name: FULFER LLC  
 Attn Business Address:  
 Business Address: LEGALZOOM.COM, INC., 100 W BROADWAY SUITE 100, GLENDALE, CA 91210 2479 N 66TH ST WAUWATOSA WI 53213 USA  
 Business Email:  
 Business Phone:  
 Attn Mailing Address:  
 Mailing Address: NONE  
 Attn Third Party Address:  
 Third Party Address: NONE  
 Third Party Email:

Business Address:

Attn:   
 Address Line 1:\*   
 Country:\*   
 City:\*   
 Email:   
 Address Line 2:   
 Zip Code:\*   
 State:\*   
 Phone:

Mailing Address  If different than Business Address

Attn:   
 Address Line 1:\*   
 Country:\*   
 City:\*   
 Address Line 2:   
 Zip Code:\*   
 State:\*

3rd Party Address  Same as Filer

Attn:  Email:

Address Line 1:  Address Line 2:

Country:  Zip Code:

City:  State:

Contact

Contact Name:

Contact Phone:

Contact Email:

Signer

Printed Name:\*

Title:\*

1. Review the Trademark & Application information at the top of the screen.
2. Amend the **Business Address** section as necessary.

The system will complete the **City** and **State** fields automatically based on the zip code.

3. Amend the **Mailing Address** section as necessary.

The Mailing Address section is inactive by default. The user may select the **'if different than Business Address'** check box to activate these fields and complete them as necessary.

4. Amend the **3<sup>rd</sup> Party Address** section as necessary.

The system will complete the **City** and **State** fields automatically based on the zip code.

**NOTE:** The user may select the **Same as Filer** check box to automatically complete the fields with the filer's information.

5. Amend the **Contact** section as necessary.
6. Complete the **Certified** section.
7. Complete the **Signer** section.

8. Click the  button.

The system displays the **Review Filing** screen.



## 1.3 Trademark Assignment

The initial processing screen for Trademark Assignments allows the user to add assignee (new owner) information. The Assignor sections of the screen are inactive by default and may not be edited.

State of Wisconsin Department of Financial Institutions  
Strengthening Wisconsin's Financial Future

JENNIFER BOOKER  
Tuesday, March 31, 2020

Dashboard Search UCC Trademark Personalization Subscriptions Logout

\* - Required Field

### Trademark Assignment

Select Filing Processing Review Payment Done

#### Trademark Information

ID: 20005100212  
Status: Active  
Registration Date: 08/02/2000  
Description: BUCKY BADGER .more  
Classification of Goods or Services: 46-LEGACY  
Expiration Date: 08/04/2020

#### Assignor (Current Owner) Information

Assignor Name: applicant name here

#### Assignor Address:

Address Line 1: 123 applicant st  
Address Line 2:  
Country: United States  
City: Madison  
Zip Code: 53705  
State: Wisconsin

#### Assignee (New Owner) Information:

Entity  Sole Proprietor

Entity Name: \*

#### Assignee Business Address:

Attn:  
Address Line 1: \*  
Country: \* United States  
City: \*  
Email:  
Address Line 2:  
Zip Code: \*  
State: \* Wisconsin  
Phone:

#### Assignee Mailing Address If different than Business Address

Attn:  
Address Line 1: \*  
Country: \* United States  
City: \*  
Address Line 2:  
Zip Code: \*  
State: \* Wisconsin

#### 3rd Party Address Same as Filer

Attn:  
Address Line 1:  
Country: United States  
City:  
Email:  
Address Line 2:  
Zip Code:  
State: Wisconsin

#### Contact

Contact Name:  
Contact Phone:  
Contact Email:

#### Signer

I, the undersigned, swear or affirm that I am the registrant or a duly authorized representative of the registrant for this trademark and that this trademark is hereby assigned to the assignee identified on this registration.

Printed Name: \*  
Title: \*

Back Process

1. Complete the **Assignee Information** section.

The user may select **Entity** or **Sole Proprietor** for the Business Type. The name fields will update based on this selection.

2. Complete the **Business Address** section.

The system will complete the **City** and **State** fields automatically based on the zip code.

3. Complete the **Mailing Address** section as necessary.

The Mailing Address section is inactive by default. The user may select the **if different than Business Address** check box to activate these fields and complete them as necessary.

4. Complete the **3<sup>rd</sup> Party Address** section.

The system will complete the **City** and **State** fields automatically based on the zip code.

**NOTE:** The user may select the **Same as Filer** check box to automatically complete the fields with the filer's information.

5. Amend the **Contact** section as necessary.

6. Complete the **Signer** section.

7. Click the  button.

The system displays the **Review Filing** screen.

## 1.4 Trademark Cancellation

The initial processing screen for Trademark Cancellation filings displays information regarding the trademark.

The screenshot shows the 'Trademark Cancellation' processing screen. At the top, there is a navigation bar with the state logo and the text 'State of Wisconsin Department of Financial Institutions' and 'Strengthening Wisconsin's Financial Future'. The user is identified as 'JENNIFER BOOKE' on 'Tuesday, March 31, 2022'. The navigation menu includes 'Dashboard', 'Search', 'UCC', 'Trademark', 'Personalization', and 'Subscriptions'. The 'Trademark' menu item is active. A 'Logout' link is in the top right corner. Below the navigation bar, there is a 'Trademark Cancellation' header with an 'Instructions' button. A progress bar shows the steps: 'Select Filing', 'Processing', 'Review', 'Payment', and 'Done'. The 'Review' step is currently active. The main content area is titled 'Trademark Cancellation' and contains the following sections:

- Trademark Information:** Registration ID: 20005100212; Description: BUCKY BADGER ...more; Status: Active.
- Applicant Information:** Type: Entity; Entity Name: applicant name here; Attn Business Address: Business Address: 123 applicant st Madison WI 53705 USA; Business Email: -----; Business Phone: -----; Attn Mailing Address: Mailing Address: NONE; Attn Third Party Address: 3rd party; Third Party Address: 3rd party address Madison WI 53703 USA; Third Party Email: -----.
- Contact:** Contact Name: [text input]; Contact Phone: [text input]; Contact Email: [text input].
- Signer:**  I, the undersigned, am the registrant, owner, officer or representative who is authorized to submit the cancellation for the registered Trademark. Printed Name: [text input]; Title: [text input].

At the bottom of the form, there are two buttons: 'Back' and 'Process'.

1. Review the Trademark and Applicant information at the top of the screen.
2. Complete the **Contact** section.
3. Complete the **Signer** section.
4. Click the **Process** button.

The system displays the **Review Filing** screen.

# 1.5 Trademark Renewal

The initial processing screen for Trademark renewal filings displays information regarding the trademark.

State of Wisconsin Department of Financial Institutions  
Strengthening Wisconsin's Financial Future

JENNIFER BOOKER  
Tuesday, March 31, 2020

Dashboard Search+ UCC+ Trademark+ Personalization+ Subscriptions+ Logout

Trademarks > - Required Field

### Trademark Renewal

Select Filing Processing Review Payment Done

#### Trademark Information

ID: 20105002100  
Status: Active  
Classification of Goods or Services: 46-LEGACY  
Registration Date: 05/26/2010  
Expiration Date: 05/26/2020  
Description: TASTE OF WISCONSIN

#### Applicant Information

Type: Entity  
Entity Name: WESTERN KIWANIS FOUNDATION OF KENOSHA, INC.  
Attn Business Address:  
Business Address: PO BOX 602 KENOSHA WI 53143 7515 26TH AVENUE KENOSHA WI 53143 USA  
Business Email:  
Business Phone:  
Attn Mailing Address:  
Mailing Address: NONE  
Attn Third Party Address:  
Third Party Address: NONE  
Third Party Email:

#### Business Address:

Attn:   
Address Line 1:\* PO BOX 602 KENOSHA WI 53143  
Country:\* United States  
City:\* KENOSHA  
Email:   
Address Line 2: 7515 26TH AVENUE  
Zip Code:\* 53143  
State:\* Wisconsin  
Phone:

#### Mailing Address If different than Business Address

Attn:   
Address Line 1:\*   
Country:\* United States  
City:\*   
Address Line 2:   
Zip Code:\*   
State:\* Wisconsin


#### Contact

Contact Name:   
Contact Phone:   
Contact Email:

#### Signer

Printed Name:\*   
Title:\*

Back Process

1. Review the Applicant information at the top of the screen.
2. Complete the **Contact** section.
3. Complete the **Signer** section.
4. Click the  button.

The system displays the **Review Filing** screen.

## 1.6 Review Screen

The system displays all of the previously entered trademark information on the Review screen. The user should verify the information for accuracy before proceeding to the next steps.

Review Filing
Instructions

Select Filing
Processing
Review
Payment
Done

**Review Filing**

**Trademark Information**

Description: TASTE OF WISCONSIN  
 ID: 20105002100  
 Status: Active  
 Classification of Goods or Services: 46-LEGACY  
 Registration Date: 05/26/2010  
 Expiration Date: 05/26/2020

**Assignor (Current Owner) Information**

Assignor Name: WESTERN KIWANIS FOUNDATION OF KENOSHA, INC.  
 Assignor Address: PO BOX 602 KENOSHA WI 53143 7515 26TH AVENUE KENOSHA WI 53143 USA

**Assignee (New Owner) Information**

Assignee Type: Sole Proprietor  
 First Name: J  
 Middle Name:  
 Last Name: Smith  
 Suffix:  
 Attn Business Address:  
 Business Address: 123 Madison Yard Way Racine WI 53407 USA  
 Business Email:  
 Business Phone:  
 Attn Mailing Address:  
 Mailing Address: 1000 Happy Place Milwaukee WI 53203 USA  
 Attn Third Party Address: Filer  
 Third Party Address: 1313 Hello Lane Milwaukee WI 53202 USA  
 Third Party Email: filings@testfield.com

**Contact**

Contact Name: Filer Test  
 Contact Phone: 1230000000  
 Contact Email: N/A

**Signer**

I the Undersigned swear or affirm that I am the registrant or a duly authorized representative of the registrant for this trademark and this tradename or trademark is hereby assigned to the assignee identified on this registration.

Printed Name: J Smith  
 Title: Manger

All applications and assignments must be notarized

To complete your application or assignment of a Trademark, you will need to do the following:

1. Click here to **Print** a copy of your form.\*
2. Take this form and have your signature notarized.
3. Scan your notarized form as a PDF, ensuring that the notary seal is legible on the scan. (Impression seals may need to be shaded before scanning.)
4. Sign back into this account
5. Click on Saved for Later, Continue, Process
6. Upload your notarized form below.
7. Choose 'Save and Add to Cart'
8. Enter payment information to submit your application or assignment.

\*Save this form until notarized copy can be uploaded to your account by clicking **Save Application for a later Date**.

Your online form will be examined by the department for completion. Incomplete forms will be rejected and any applicable fees will be refunded. Please do not mail your form.

#### Upload notarized PDF

Fillable PDFs must be flattened before submission, see instructions for details.

Copyright 2020 State of Wisconsin

1. Review the previously entered information for accuracy.
2. Complete one of the following...

If...	Then...
The filing does NOT require a notarized copy of the form...	Click the <b>Save and Add to Cart</b> button.
The filing requires a notarized copy of the form and the user has it ready to upload...	<ol style="list-style-type: none"><li>1. Click the <b>Select File</b> button.</li><li>2. Browse to the copy and select it.</li><li>3. Click the <b>Upload</b> button to complete the upload.</li></ol>
The filing requires a notarized copy of the form and the user does not have it ready to upload (or does not wish to upload it)...	The user may... <ul style="list-style-type: none"><li>• Click the <b>Save Application for a Later Date</b> button to save the progress on the filing in the <b>Saved for Later Shopping Cart</b> for processing at a later date.</li><li>• Click the <b>Print button</b> and deliver a notarized copy to the Department for processing.</li></ul>

**File must be a flattened PDF. Submitting a fillable PDF form that has not been flattened will cause all information entered in fillable fields to be deleted.**

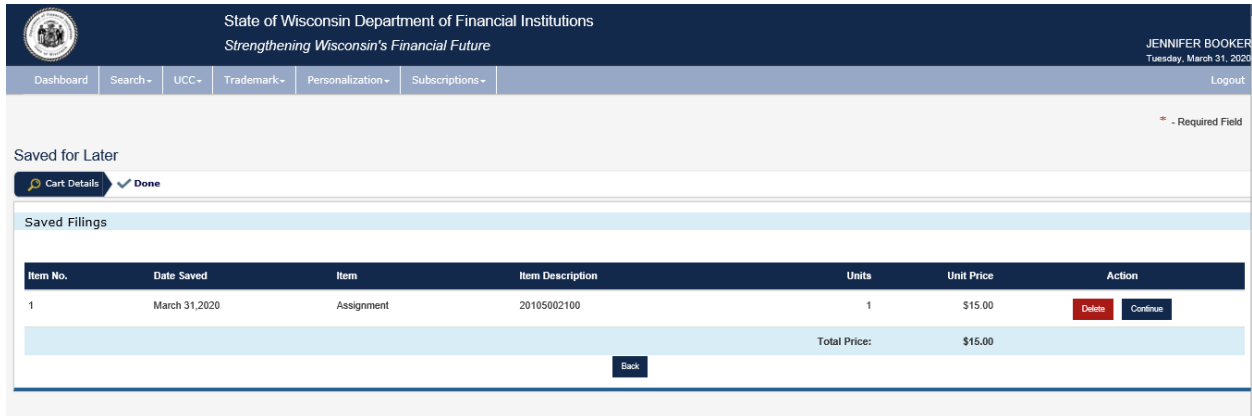
#### How to flatten a PDF:

1. Open the PDF
2. Click **File**.
3. Click **Print**.
4. Select **Adobe PDF or Microsoft Print to PDF** (or similar) from the **Printer** drop-down menu.
5. Click **Print**.
6. Select a destination on your computer to save the flattened PDF file, then click **Save**.
7. The flattened PDF file can now be submitted.

## 2 Complete Processing

### 2.1 Saved for Later Shopping Cart

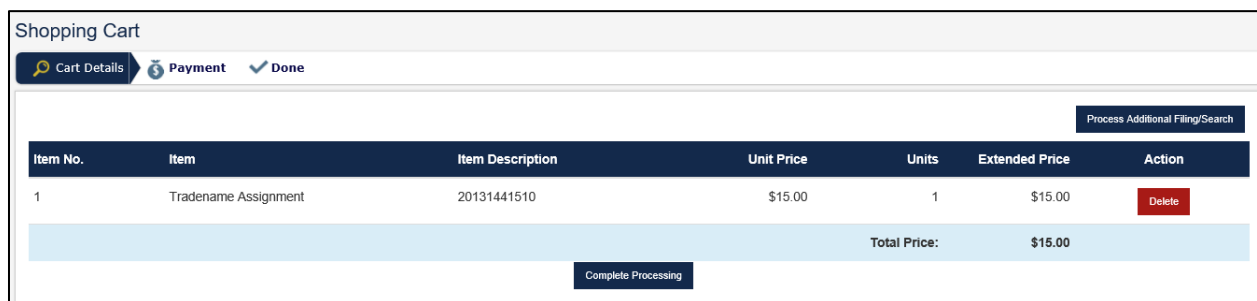
If the user saves an application for processing at a later date, the filing is stored in the Saved for Later Shopping Cart.



The user may click the **Delete** button to delete the filing from the Saved for Later Shopping Cart or the **Continue** button to return to the Review Screen for the selected filing.

### 2.2 Shopping Cart

The shopping cart is displayed when a filing is added to the cart. The user may proceed to payment, delete a filing, or add additional filings.



#### 2.2.1 Add an Additional Filing or Search

The user may click the **Process Additional Filing/Search** button to add an additional filing or search.

#### 2.2.2 Delete a Filing from the Shopping Cart

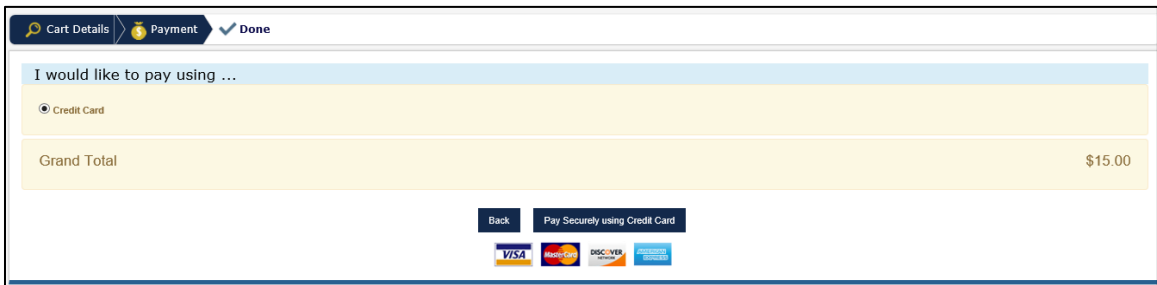
The user may click the **Delete** button to delete a filing from the shopping cart.

#### 2.2.3 Pay and Complete Processing

The user must pay for their filings in order to complete processing.

1. Click the **Complete Processing** button.

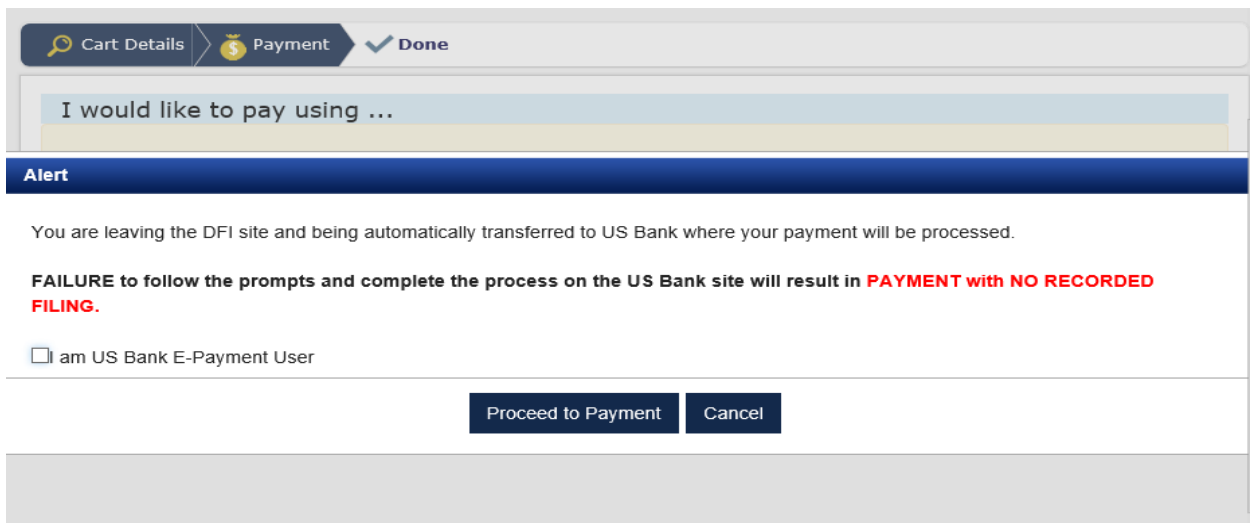
The system displays the Credit Card payment type options.



**NOTE:** Credit Card is selected by default.

2. Click the **Pay Securely using Credit Card** button.
3. A pop up will display to allow you to sign or create a US Bank account by checking the box or you

can choose the **Proceed to Payment** to continue without signing into or creating a US Bank account.





The system displays the payment screen.

**State of Wisconsin**  
**e-Payment Services**

### Make a Payment

**My Payment**

**DFI Online CC Purchase**  
Amount Due \$15.00

**Payment Information**

Frequency One Time  
Payment Amount \$15.00  
Payment Date Pay Now

**Contact Information**

First Name Matt  
Last Name Hazard  
Company (Optional)  
Address 1 123 Online Filer Rd.  
Address 2 (Optional)  
City/Town Belgium  
State/Province/Region WI  
Zip/Postal Code 53004  
Country USA  
Phone Number 5555555555  
Email Address mhazard@gcrincorporated.com  
[Become a Registered User](#)

**Payment Method**

Card Number    
Expiration Date Month  Year   
Card Security Code   
Card Billing Address  Use my contact information address  
 Use a different address

**Continue** [Cancel](#)

4. Enter the payment information.

5. Click the  button.

The system displays the Review Payment screen.



### Review Payment

Please review the information below and select Confirm to process your payment. Select Back to return to the previous page to make changes to your payment.

#### Payment Details

<b>Description</b>	Dept. of Wisconsin Financial Institutions DFI Online CC Purchase <a href="https://www.wdfi.org/">https://www.wdfi.org/</a>
<b>Payment Amount</b>	\$15.00
<b>Payment Date</b>	02/04/2019

#### Payment Method

<b>Payer Name</b>	Matt Hazard
<b>Card Number</b>	*1111
<b>Expiration Date</b>	Dec-2023
<b>Card Type</b>	Visa
<b>Confirmation Email</b>	mhazard@gcrincorporated.com

#### Billing Address

<b>Address 1</b>	123 Online Filer Rd.
<b>City/Town</b>	Belgium
<b>State/Province/Region</b>	WI
<b>Zip/Postal Code</b>	53004
<b>Country</b>	USA


#### Contact Information

<b>First Name</b>	Matt
<b>Last Name</b>	Hazard
<b>Address 1</b>	123 Online Filer Rd.
<b>City/Town</b>	Belgium
<b>State/Province/Region</b>	WI
<b>Zip/Postal Code</b>	53004
<b>Country</b>	USA
<b>Phone Number</b>	5555555555
<b>Email Address</b>	mhazard@gcrincorporated.com

[Confirm](#) [Back](#)

- Click the  button.

The system displays the Confirmation screen.



**State of Wisconsin**  
**e-Payment Services**

**Confirmation**

You must click the "Continue" button below in order to return to the state agency's website.  
Please keep a record of your Confirmation Number, or [print this page](#) for your records.

Confirmation Number **WS2PCC003111920**

**Payment Details**

<b>Description</b>	Dept. of Wisconsin Financial Institutions DFI Online CC Purchase <a href="https://www.wdfl.org/">https://www.wdfl.org/</a>
<b>Payment Amount</b>	\$15.00
<b>Payment Date</b>	02/04/2019
<b>Status</b>	PROCESSED

**Payment Method**

<b>Payer Name</b>	Matt Hazard
<b>Card Number</b>	*1111
<b>Card Type</b>	Visa
<b>Confirmation Email</b>	mhazard@gcrincorporated.com

**Billing Address**

<b>Address 1</b>	123 Online Filer Rd.
<b>City/Town</b>	Belgium
<b>State/Province/Region</b>	WI
<b>Zip/Postal Code</b>	53004
<b>Country</b>	USA

**Continue**

7. Click the **Process Filing** button to return to the WDFI Online Filing System.

**NOTE:** This step is imperative to submitting your filing for processing.