

WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS (WDFI)

TRADEMARK FILINGS

User Guide – Online User – Trademark Filings

“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 at www.wdft.org)
- 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

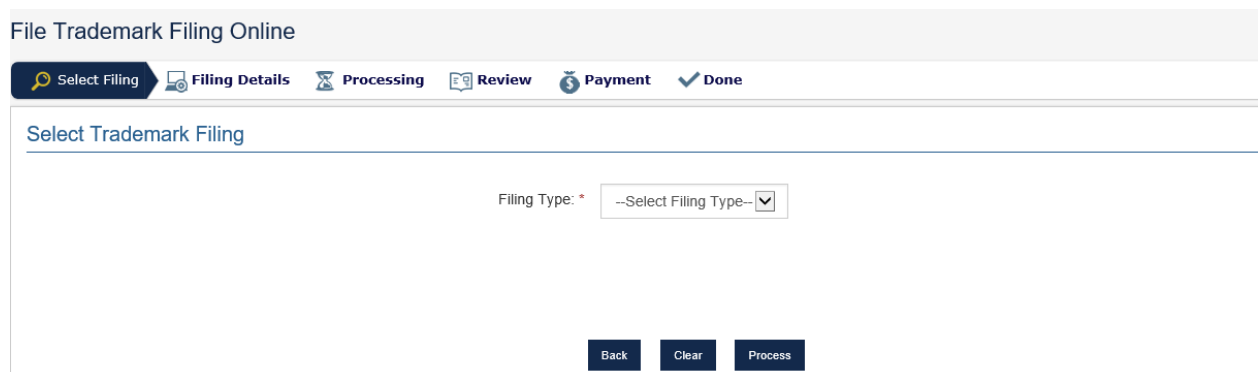
All of the available online Trademark filings may be accessed from the Trademark header menu.



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

1.1 Trademark Registration

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



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

JENNIFER BOOKE
Tuesday, March 31, 2020
Logout

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

Trademarks

Trademark Registration

Instructions

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*

Address Line 2

Country*

City*

State*

Zip Code*

Email:

Phone:

Mailing Address ☐ If different than Business Address

Attn:

Address Line 1*

Address Line 2

Country*

City*

State*

Zip Code*

3rd Party Address ☐ Same as Filer

Attn:

Address Line 1:

Address Line 2:

Country:

City:

State:

Zip Code:

Email:

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

Copyright 2020 State of Wisconsin

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.

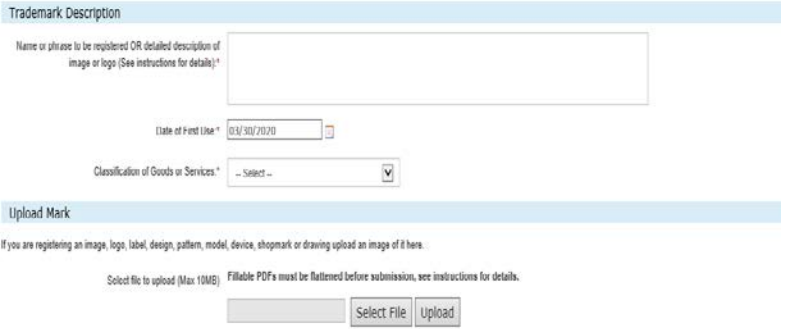
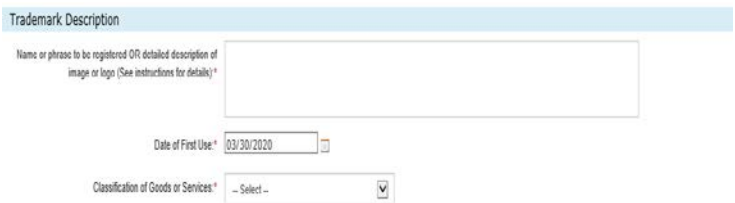
The Mailing Address section is inactive by default. The user may select the '**if different than Business Address**' check box to activate these fields and complete them as necessary.

4. Complete the **3rd 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...	<ol style="list-style-type: none"> 1. Complete the Trademark Description section. 2. Upload an image of the mark. 
The user is registering a trademark without an image...	<p>Complete the Trademark Description 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:*

Address Line 2:

Country:*

City:*

State:*

Zip Code:*

Email:

Phone:

Mailing Address ☐ If different than Business Address

Attn:

Address Line 1:*

Address Line 2:

Country:*

City:*

State:*

Zip Code:*

3rd Party Address
☐ Same as Filer

Attn:

Address Line 1:

Country:

City:

Email:

Address Line 2:

Zip Code:

State:

Contact

Contact Name:

Contact Phone:

Contact Email:

Signer

Printed Name:*

Title:*

Back
Process

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 **3rd 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


Process

 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

DashboardSearch+UCC+Trademark+Personalization+Subscriptions+Logout

* - Required Field

Trademark Assignment

Instructions

Select FilingProcessingReviewPaymentDone

Trademark Assignment

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

Country: United States

City: Madison

Address Line 2:

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:*

BackProcess

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 **3rd 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 is a dark blue header with the Wisconsin Department of Financial Institutions logo and name, the slogan 'Strengthening Wisconsin's Financial Future', the user name 'JENNIFER BOOKE', the date 'Tuesday, March 31, 2022', and a 'Logout' link. Below the header is a navigation bar with links: Dashboard, Search, UCC, Trademark, Personalization, and Subscriptions. The main content area is titled 'Trademark Cancellation' and includes an 'Instructions' button. A progress bar shows steps: Select Filing, Processing, Review, Payment, and Done. The 'Trademark Information' section displays: Registration ID: 20005100212, Description: BUCKY BADGER ...more, and Status: Active. The 'Applicant Information' section shows: Type: Entity, Entity Name: applicant name here, Attn Business Address: 123 applicant st Madison WI 53705 USA, Business Address: 123 applicant st Madison WI 53705 USA, Business Email: (empty), Business Phone: (empty), Attn Mailing Address: NONE, Mailing Address: NONE, Attn Third Party Address: 3rd party, Third Party Address: 3rd party address Madison WI 53703 USA, and Third Party Email: (empty). The 'Contact' section has input fields for Contact Name, Contact Phone, and Contact Email. The 'Signer' section includes a checkbox for authorization, and input fields for Printed Name and Title. At the bottom are 'Back' and 'Process' buttons.

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

JENNIFER BOOKE
Tuesday, March 31, 2022

Logout

Dashboard Search UCC Trademark Personalization Subscriptions

Trademark Cancellation

Instructions

Select Filing Processing Review Payment Done

Trademark Cancellation

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:

Contact Phone:

Contact Email:

Signer

☐ I, the undersigned, am the registrant, owner, officer or representative who is authorized to submit the cancellation for the registered Trademark

Printed Name:*

Title:*


Back 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
Logout

DashboardSearch >UCC >Trademark >Personalization >Subscriptions >

- Required Field

Trademark Renewal

Instructions

Select FilingProcessingReviewPaymentDone

Trademark Renewal

Trademark Information

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

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:*

BackProcess

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.

[Back](#)

[Save and Add to Cart](#)

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 Save and Add to Cart button.
The filing requires a notarized copy of the form and the user has it ready to upload...	<ol style="list-style-type: none">1. Click the Select File button.2. Browse to the copy and select it.3. Click the Upload button to complete the upload.
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)...	<p>The user may...</p> <ul style="list-style-type: none">• Click the Save Application for a Later Date button to save the progress on the filing in the Saved for Later Shopping Cart for processing at a later date.• Click the Print button and deliver a notarized copy to the Department for processing.

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 screenshot shows the 'Saved for Later' section of the State of Wisconsin Department of Financial Institutions website. The header includes the state seal, the department name, and the slogan 'Strengthening Wisconsin's Financial Future'. The user is identified as JENNIFER BOOKER on Tuesday, March 31, 2020. The navigation bar contains links for Dashboard, Search, UCC, Trademark, Personalization, and Subscriptions, along with a Logout button. The 'Saved for Later' section has a 'Cart Details' button and a 'Done' button. Below this is a 'Saved Filings' table with the following data:

Item No.	Date Saved	Item	Item Description	Units	Unit Price	Action
1	March 31, 2020	Assignment	20105002100	1	\$15.00	Delete Continue
					Total Price:	\$15.00

A 'Back' button is located at the bottom of the table.

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.

The screenshot shows the 'Shopping Cart' section of the website. The header includes the state seal, the department name, and the slogan 'Strengthening Wisconsin's Financial Future'. The user is identified as JENNIFER BOOKER on Tuesday, March 31, 2020. The navigation bar contains links for Dashboard, Search, UCC, Trademark, Personalization, and Subscriptions, along with a Logout button. The 'Shopping Cart' section has a 'Cart Details' button, a 'Payment' button, and a 'Done' button. Below this is a 'Process Additional Filing/Search' button. The 'Shopping Cart' table has the following data:

Item No.	Item	Item Description	Unit Price	Units	Extended Price	Action
1	Tradename Assignment	20131441510	\$15.00	1	\$15.00	Delete
					Total Price:	\$15.00

A 'Complete Processing' button is located at the bottom of the table.

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

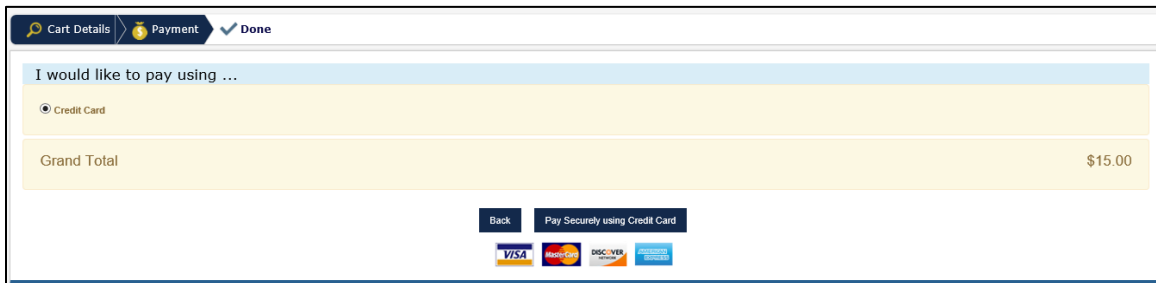
The user may click the [Delete](#) button to delete a filing from the shopping cart.

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.

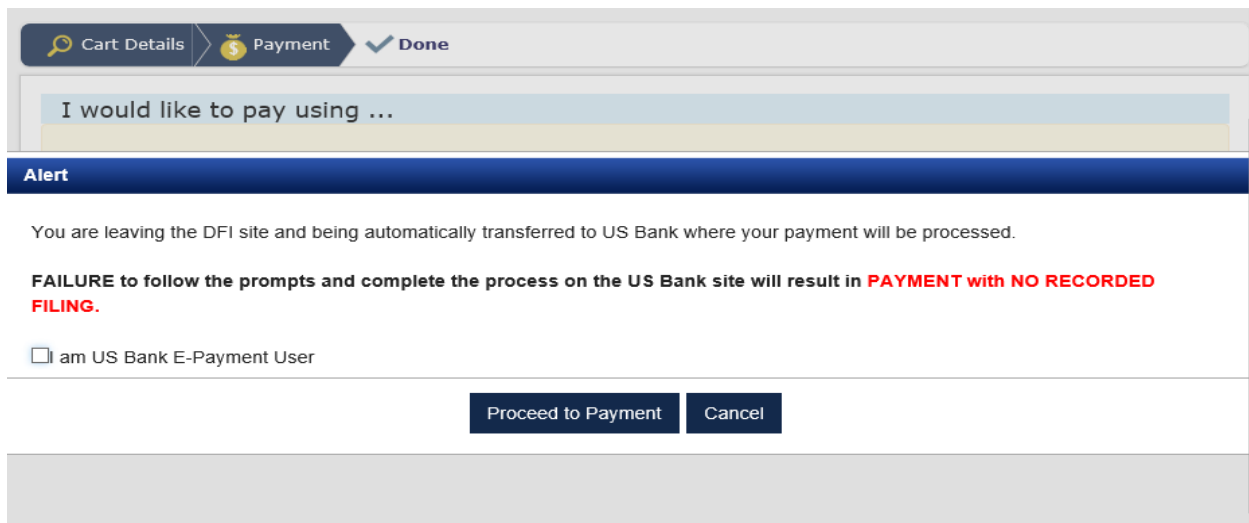
The system displays the Credit Card payment type options.



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.

The screenshot shows the 'Make a Payment' page of the State of Wisconsin e-Payment Services. The page header includes the Wisconsin state seal and the text 'State of Wisconsin e-Payment Services'. The main section is titled 'Make a Payment' and contains several sub-sections: 'My Payment' showing a 'DFI Online CC Purchase' with an 'Amount Due' of '\$15.00'; 'Payment Information' showing 'Frequency' as 'One Time', 'Payment Amount' as '\$15.00', and 'Payment Date' as 'Pay Now'; 'Contact Information' with fields for '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), and 'Email Address' (mhazard@gcrincorporated.com), along with a link to 'Become a Registered User'; and 'Payment Method' with fields for 'Card Number', 'Expiration Date' (Month and Year dropdowns), 'Card Security Code', and 'Card Billing Address' (radio buttons for 'Use my contact information address' and 'Use a different address'). At the bottom are 'Continue' and 'Cancel' buttons.

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.



State of Wisconsin
e-Payment Services

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](#)

Description Dept. of Wisconsin Financial Institutions
DFI Online CC Purchase
<https://www.wdfl.org/>

Payment Amount \$15.00

Payment Date 02/04/2019

[Payment Method](#)

Payer Name Matt Hazard

Card Number *1111

Expiration Date Dec-2023

Card Type Visa

Confirmation Email mhazard@gcrincorporated.com

[Billing Address](#)

Address 1 123 Online Filer Rd.

City/Town Belgium

State/Province/Region WI

Zip/Postal Code 53004

Country USA

[Contact Information](#)

First Name Matt

Last Name Hazard

Address 1 123 Online Filer Rd.

City/Town Belgium

State/Province/Region WI

Zip/Postal Code 53004

Country USA


Phone Number 5555555555

Email Address mhazard@gcrincorporated.com

[Back](#)

6. 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

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

Payment Method

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

Billing Address

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