PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Insignia Registration or Amendment
Name	DSCB:54-1311/1312 (rev. 7/2015)
Address	
City State Zip Code Return document by email to:	13112
Read all instructions	prior to completing.
Fee: \$70	
Check one: Application for registration (§	§ 1311) Application for Amendment (§ 1312)
In compliance with the requirements of the applicable the undersigned organization desiring the register/amend its in	provisions (relating to registration/amendment of insignia), nsignia, hereby states that:
1. The name of the applicant is (if a corporation, also give)	jurisdiction of incorporation):
2. The residence, location or place of business of the applican	nt is:
Number and street City	State Zip County
3. The insignia to be registered or amended is (a facsimile of application as Exhibit A and is incorporated herein by refe	
Application for Amendment: complete paragraph 4	
4. The last preceding filing with respect to this insignia was n	nade in the Department on: Date (MM/DD/YYYY)

 The principles and activities of the applicant organization are not repugnant to the Constitution and laws of the United States or of this Commonwealth. 	
	r design constituting the insignia and no other person has the right to alth, either in the identical form thereof or in a form which is similar to, o be calculated to deceive.
Application for Amendment: complete	paragraphs 7 and 8
7. Check one of the following:	
The foregoing statements revise an inaccurate and restate in full such i	y information set forth in the preceding filing which has become nformation as so revised.
	any information set forth in the preceding filing which has become h information as so revised is as follows:
	_
	e any information set forth in the preceding filing which as become uch information as so revised is set forth in full in Exhibit B attached
	IN TESTIMONY WHEREOF, the undersigned organization has caused this Application to be executed this day of
	Name of Applicant Organization
	Signature
	Title

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Web site: www.dos.pa.gov/corps

Instructions for Completion of Form:

A. Typewritten is preferred. If handwritten, the form shall be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70 made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- B. An application may be filed by an organization described in and complying with 54 Pa.C.S. § 1301 (relating to definitions.
- C. The name of a commercial registered office provider may not be used in Paragraph 2 in lieu of an address.
- D. A name, badge, motto, button, decoration, charm, emblem, rosette, label or other insignia may be registered on this form. The term "label" means a label, symbol, mark or private stamp, including a label adopted by labor unions for the purpose of designating the product of their particular labor or workmanship.
- E. This registration is effective through December 31, 2021 and will continue in effect for additional terms of ten years each if form DSCB:54-1314/1515 (Decennial Report-Insignia/Mark Used with Articles or Supplies) is timely filed in the year 2021 and in each tenth year thereafter (e.g. 2031, 2041).
- F. This form and all accompanying documents shall be mailed to the address stated above.