

MM8 (E) – REQUEST FOR THE RECORDING OF A CANCELLATION OF THE INTERNATIONAL REGISTRATION

For use by the holder:

Number of continuation sheets:

Holder's reference:

For use by the Office:

Office's reference:

1. INTERNATIONAL REGISTRATION NUMBER(S)¹

This form may be used for **several** international registrations, provided that all registrations concerned are the subject of a **total** cancellation, as provided for in item 4(a))

2. NAME OF THE HOLDER²

As **recorded** in the International Register.

¹ If the present request relates to a **partial** cancellation, as provided for in item 4(b) of this form, you may **only** use this form to request the recording of the cancellation of a single international registration.

² Where the international registration is **jointly owned** indicate the names of each joint holder as recorded in the international registration here.

3. APPOINTMENT OF A (NEW) REPRESENTATIVE³

Only complete this item if you are appointing a (new) representative.

(a) Name:

(b) Address:

(c) E-mail address⁴:

(d) Telephone number⁵:

SIGNATURE OF THE HOLDER APPOINTING THE ABOVE (NEW) REPRESENTATIVE⁶

Signature:

³ You **must** indicate the name, address and e-mail address of the (new) representative (and sign this item) otherwise, WIPO cannot record the appointment. Please note that the appointment of a new representative will replace any representative previously appointed.

⁴ When a representative is appointed, WIPO will send all communications concerning the international registration(s) in item 1 **only** to the e-mail address of the representative. The holder and the representative must ensure that the e-mail address indicated here is accurate and kept up to date.

⁵ Indicating a phone number is not required, but it will allow WIPO to reach your representative if needed.

⁶ If the signature of the holder is missing, WIPO will process the request but the (new) representative will not be recorded.

4. GOODS AND SERVICES⁷

Check **either** (a) or (b).

- (a) **Total cancellation** (the cancellation is to be recorded for **all** goods and services covered by the international registration(s) indicated in item 1); or
- (b) **Partial cancellation** (the cancellation affects only **some** of the goods and services covered by the international registration indicated in item 1)

Any class, covered by said registration(s), which is **not** mentioned below **remains** as recorded in the International Register.

- (i) **Entire class(es)**, if any, to be cancelled (specify **only** the number(s) of the class(es) concerned), and/or

- (ii) If the cancellation affects **only some** of the goods and services in a given class, provide below the **relevant class number** and the **complete new list** of goods and services. This new list will replace the currently recorded list for such class in the International Register (in other words, do not just indicate the goods or services that you wish to delete from the currently recorded list)⁸:

- If the space provided is not sufficient, check the box and use a **continuation sheet**.

⁷ You can use the Madrid Goods and Services Manager (MGS) to find indications accepted by WIPO. In MGS, you can also find acceptance information for selected Contracting Parties. MGS is available at www.wipo.int/mgs.

⁸ Use font "Courier New" or "Times New Roman", size 12 pt., or larger. Use semicolon (;) to separate indications or goods or services listed in a given class. For example:

09 Screens for photoengraving; computers.

35 Advertising; compilation of statistics; commercial information agencies.

5. SIGNATURE OF THE HOLDER AND/OR THEIR REPRESENTATIVE

Holder (as recorded in the International Register):

By signing this form, I declare that I am entitled to sign it under the applicable law.

Name:

Signature:

Representative of the holder (as recorded in the International Register or herein appointed):

By signing this form, I declare that I am entitled to sign it under the applicable law.

Name:

Signature:

6. OFFICE OF THE CONTRACTING PARTY OF THE HOLDER PRESENTING THE REQUEST

Where the request is presented through an Office.

(a) Name of the Office:

(b) Name and signature of the official signing on behalf of the Office:

By signing this form, I declare that I am entitled to sign it under the applicable law.

(c) Name and e-mail address of the contact person in the Office:

CONTINUATION SHEET

No. of

Empty rectangular area for continuation of text.