


Wyoming Secretary of State

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WY Secretary of State
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Application for Registration of Trademark or Service Mark

1. Provide a written description of the trademark or service mark. Your written description must include all words, names, symbols, devices and designs which the applicant wishes to be included within the mark. You may attach a separate sheet if needed; however, **you must describe the mark completely**:

Trademark includes the terms **Casper Pediatrics** and Wyoming Medical Center together with our logo. The logo is a three-sided shield, colors are gold, bronze and black (see attached).

2. Name of applicant:

Wyoming Medical Center

3. Business address of applicant:

1233 E. Second St., Casper, WY 82601

4. Mailing address of applicant:

same as above

5. Applicant is (check only one; this selection should correspond to the information listed in item #2):

☐

individual;

☒

corporation;

☐

general partnership;

☐

limited partnership;

☐

limited liability company;

☐

statutory trust;

☐

unincorporated association;

☐

statutory foundation;

☐

other

6. a. If the applicant is a corporation, limited partnership, limited liability company, statutory trust or statutory foundation, list:

The state of incorporation or organization: Wyoming

The date incorporated or organized: 02/06/1986

(Date – mm/dd/yyyy)

b. If the applicant is a general partnership or limited partnership, list the names of the general partners or partners:

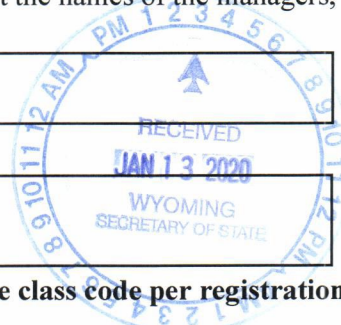
c. If the applicant is a limited liability company, statutory trust or statutory foundation, list the names of the managers, members, trustees, or directors:

d. If the applicant is "other," explain:

7. Provide the class number **and** title of the goods or services (see attachment). Use only one class code per registration:

Class number: 100

Title: Miscellaenous



8. Provide a brief description of the goods or services within the class (i.e., what your product is, or what service you provide):

Inpatient acute care hospital

9. List the mode or manner in which the mark is used to identify the goods or services (e.g.: goods - labels on cans, bags, wrappers, etc.; tags, nameplates affixed directly to product; services - labels on laundry bags, advertising, window signs, etc.):

Signage, advertising, stationary, promotional materials, website, digital materials

10. An application to register the mark or portions or a composite has been filed by the applicant or a predecessor in interest in the U.S. Patent and Trademark office: Yes ☐ No ☒

If yes, provide filing date, serial number of each application, the status and, if any application was finally refused registration or has not otherwise resulted in registration, the reasons therefore:

11. Date of first use by applicant or predecessor (*the mark must be in use before it can be registered*):

a. Anywhere: 12/30/2019
(Date - mm/dd/yyyy)

b. In this state: 12/30/2019
(Date - mm/dd/yyyy)

12. **One** photocopy or facsimile of the mark **as it is actually used** must accompany this application.

13. The applicant is the owner of the mark. The mark is in use and to the knowledge of the person verifying this application, no other person has registered, either federally or in this state, or has the right to use such mark either in the identical form thereof or in such near resemblance as to be likely, when applied to the goods or services of such other person, to cause confusion or to cause mistake or to deceive.

Signature: [Signature]

Date: 01/02/2020
(mm/dd/yyyy)

Print Name: Mike Staley

Contact Person: Community Development Office

Title: SVP & Chief Administrative Officer

Daytime Phone Number: 307-577-2410

Email: cdo@wyomingmedicalcenter.org

(Email provided will receive filing evidence)

*May list multiple email addresses

The foregoing instrument was subscribed and sworn before me by Mike Staley
Signatory

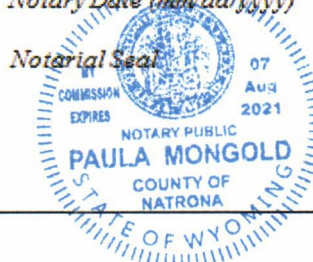
[Signature]
Notary Public

State of Wyoming

County of Natrona

1/2/2020
Notary Date (mm/dd/yyyy)

8/7/21
Notary Commission Expiration





Casper Pediatrics

Wyoming Medical Center

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(307) 234-6765
WyomingMedicalCenter.org