## Kingdom of Cambodia Nation - Religion - King

Form: 015-RCN/Eng *CAMBODIA* 

**To**: Department of Intellectual Property Rights Ministry of Commerce

## REQUEST FOR RECORDAL OF CHANGE OF NAME OF APPLICANT

1. Mark:		
2. Class(es):		
3. App. No(s):		
4. Registration No(s):		
<b>5. Name and Address</b> - From:	of Applicant:	
- To:		
6. Name of Local Age	nt/Attorney and A	Address for Service:
Tel:	Fax:	Email:
<ul> <li>Original Nota</li> <li>Agent/Attorney</li> </ul>	tified copy of notar arized Power of A y is newly appointed	rized Declaration of Name Change Attorney and Deed of Substitution, if the
Signature:		<del>_</del>
Name of Signatory: Title:		[Stamp]
Date:		