




REGISTRATION OF THE TRADEMARK

	Reference: <input type="text"/>
TRE Service Priority - Prioritaire <input type="text"/>	Send Date: <input type="text"/>

Production of mark:**Payment Methods:**

Beneficiary: TRE Service
 Bank name: iCard AD
 IBAN: BG16 INTF 4001 2078 8813 44
 BIC/SWIFT: INTFBGSF
 Reference:

Payment details:

Subject	Amount	Curr
Filing Fee	<input type="text"/>	EUR
Additional Fee	<input type="text"/>	EUR
Total Filing Fee	<input type="text"/>	EUR

Please pay the amount within 10 days. Don't forget to quote the reference number.

Registration Number:**Registration Date:****Application Number:****Application Date:****Nice Classification:****Registration of the Trademark**

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