


**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<p>Return document by mail to:</p> <hr/> <p>Name</p> <hr/> <p>Address</p> <hr/> <p>City State Zip Code</p> <hr/> <p>Return document by email to: _____</p>	<p>Name Reservation/Transfer of Reservation</p> <p>DSCB:15-208 (7/1/2015)</p>  <p>208</p>
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Fee: \$70 Check One: Name Reservation Transfer of Name Reservation

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 208 (relating to Reservation of name), the undersigned hereby states that:

1. The name to be reserved/transferred is: _____

2. The name of the person or association reserving/transferring the name is:

3. The address of the person or association reserving/transferring the name is:

Number and street
City
State
Zip Code

For TRANSFER of Name Reservation ONLY

4. The name of the person or association to whom the name reservation is being transferred is:

5. The address of the person or association to whom the name reservation is being transferred is:

Number and street
City
State
Zip Code

IN TESTIMONY WHEREOF, the undersigned person or association has caused this Name Reservation/Transfer of Reservation to be signed this _____ day of _____, 20_____.

Name of Applicant/Transferor*

Applicant/Duly authorized representative/Transferor Signature
(A transfer of name reservation must be signed by the person who initially reserved the name.)

Title (for association applicant only)