

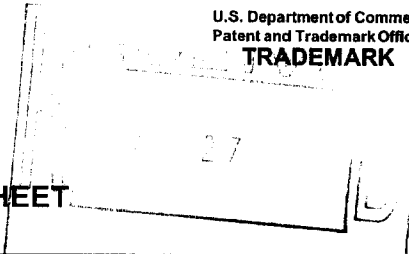
06-21-2000

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**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**



TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID # _____
- Correction of PTO Error
Reel # _____ Frame # _____
- Corrective Document
Reel # _____ Frame # _____

Conveyance Type

- Assignment
- License
- Security Agreement
- Nunc Pro Tunc Assignment
Effective Date
Month Day Year

- Merger
- Change of Name
- Other _____

Conveying Party

Mark if additional names of conveying parties attached

Name PC Connection, Inc. Execution Date
Month Day Year
01-01-00

Formerly _____

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other _____
- Citizenship/State of Incorporation/Organization Delaware

Receiving Party

Mark if additional names of receiving parties attached

Name PC Connection Sales Corp.

DBA/AK/A TA PC Connection, MacConnection

Composed of _____

Address (line 1) 730 Milford Road

Address (line 2) _____

Address (line 3) Merrimack NH 03054
City State/Country Zip Code

- Individual
 - General Partnership
 - Limited Partnership
 - Corporation
 - Association
 - Other _____
- If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Citizenship/State of Incorporation/Organization DE

FOR OFFICE USE ONLY

05/01/2000 TTON11 00000208 500630 2229042

01 FC:461 40.00 CH
02 FC:462 950.00 CH

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RECORDATION FORM COVER SHEET
CONTINUATION
TRADEMARKS ONLY

Conveying Party

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship State of Incorporation/Organization

Receiving Party

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

Individual General Partnership Limited Partnership If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached (Designation must be a separate document from the Assignment.)

Corporation Association

Other

Citizenship/State of Incorporation/Organization

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

74/488249 75/091506 75/530858

1584062 1969827 2318539

75/676181 75/696620 75/728043

2319464 1780677 1752463

75/728044 75/728041 75/728042

2318425 2318531 2318494

75/740914

2318505 2321685

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages Enter the total number of pages of the attached conveyance document including any attachments. #

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)			Registration Number(s)		
<input type="text" value="75/583377"/>	<input type="text" value="75/673403"/>	<input type="text" value="75/518118"/>	<input type="text" value="2229042"/>	<input type="text" value="2229503"/>	<input type="text" value="2228373"/>
<input type="text" value="75/570412"/>	<input type="text" value="75/737115"/>	<input type="text" value="75/527730"/>	<input type="text" value="2229504"/>	<input type="text" value="2216623"/>	<input type="text" value="2319464"/>
<input type="text" value="75/673229"/>	<input type="text" value="75/406801"/>	<input type="text" value="75/569762"/>	<input type="text" value="1721844"/>	<input type="text" value="1268322"/>	<input type="text" value="1268318"/>

Number of Properties Enter the total number of properties involved. #

Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed Deposit Account

Deposit Account

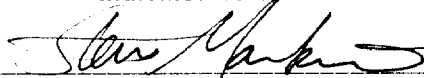
(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: #

Authorization to charge additional fees: Yes No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.


Name of Person Signing

Steve Markiewicz
Signature

3/10/00
Date Signed

PC Connection® Fax

Legal Department
450 Marlboro Street, Keene, NH 03431

DATE: 6/7/2000

PLEASE DELIVER

TO: Perlene Foster

FAX NUMBER: 703-308-7124

FROM: Steven Markiewicz

TELEPHONE NUMBER: 603.355.6125

FAX NUMBER: 603.355.6169

06/07/00 15:23
OPEN/RECEIVED

Following are 0 page(s). If any part of this message is missing or poorly received, please call me at the above number as soon as possible.

TYPE OF DELIVERY: () URGENT () 1-2 HRS () 2-3 HRS

NOTES: Please note that my return address is:

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Keene, NH 03431

you must place address on the attached recordation form cover sheet

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PC Connection, Inc., Route 101A, 730 Milford Road Merrimack, NH 03054-4631