



U.S. PATENT AND TRADEMARK OFFICE

Docket No. 41030.0018

08-06-2004



OVER SHEET

8.304

TO: The Commissioner of Patent:

102808170

ached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)  
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- Correction of PTO Error  
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Conveyance Type

- Assignment
- License
- Security Agreement
- Nunc Pro Tunc Assignment  
Effective Date  
Month Day Year  
08 23 2003
- Merger
- Change of Name
- Other \_\_\_\_\_

Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year  
02/12/2004

Name Piggly Wiggly Company

Formerly \_\_\_\_\_

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other \_\_\_\_\_
- Citizenship/State of Incorporation/Organization Oklahoma

Receiving Party

Mark if additional names of receiving parties attached

Name Surry Licensing LLC

DBA/AKA/TA \_\_\_\_\_

Composed of \_\_\_\_\_

Address (line 1) 7 Corporate Drive

Address (line 2) \_\_\_\_\_

Address (line 3) Keene

City

New Hampshire

State/Country

03431

Zip Code

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other Limited liability corporation
- Citizenship/State of Incorporation/Organization New Hampshire

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.)

08/06/2004 ECDOPER 00000039 191565 2763047

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Enter for the first Receiving Party only.

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**Correspondent Name and Address**

Area Code and Telephone Number

202.663.8000

Name Kathy J. McKnight

Address (line 1) ShawPittman LLP

Address (line 2) 2300 N. Street, NW

Address (line 3) Washington, D.C. 20037-1128

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**Pages**

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**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)

\_\_\_\_\_  
\_\_\_\_\_  
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2763847  
\_\_\_\_\_  
\_\_\_\_\_

**Number of Properties**

Enter the total number of properties involved.

# 1

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$ 40

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:

# 19-1565

Authorization to charge additional fees:

Yes  No

**Statement and Signature**

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Kathy J. McKnight

Name of Person Signing

Kathy McKnight  
Signature

Aug. 3, 2004  
Date Signed

