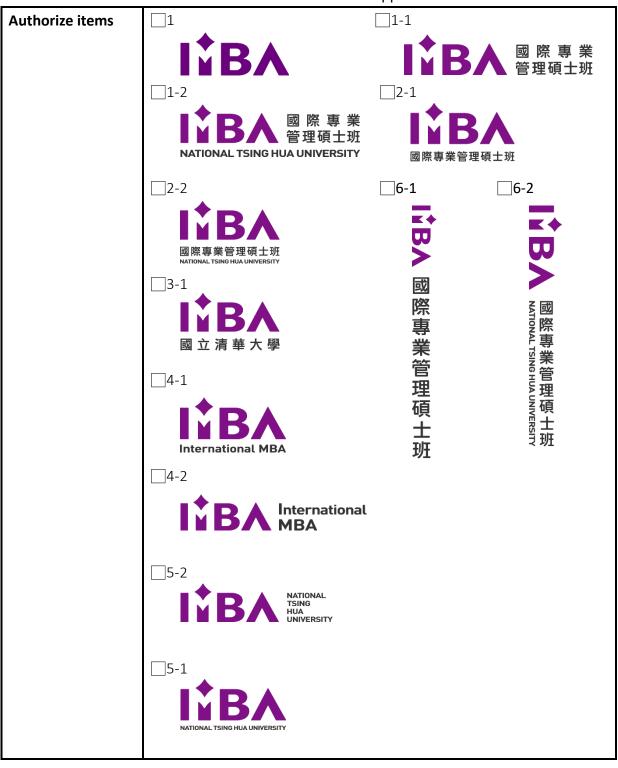
## **Using IMBA Trademarks Application (non-commercial purpose)**

## Application date:



Purpose		
Using period		
Remarks		
Application Department/ Applicant		IMBA Authorize
Department/name:		Approval
Contact phone:		☐Please resubmit with complete application.
Contact email:		□Reject
	(seal)	(seal)