

CONTINUATION SHEET FOR APPLICATION FORM RE



UNITED STATES COPYRIGHT OFFICE

REGISTRATION NUMBER

INSTRUCTIONS

- Use this continuation sheet **only** in conjunction with basic Form RE.
- Use this sheet only if you need more space to continue the listing started in Space 1 and/or Space 5 of Form RE. Use as many additional continuation sheets as you need.
- Use the continuation of Space 5 on this sheet only for contributions to periodicals by the same individual author that were published in the same calendar year.
- Follow instructions accompanying Form RE in filling out this continuation sheet. Number each line in Spaces B and C consecutively.
- Submit this continuation sheet with the basic Form RE and the other continuation sheets, if any. Clip (do not tape or staple) and fold all sheets together before submitting them.
- Type or clearly print all information in **black ink**.

EFFECTIVE DATE OF RENEWAL REGISTRATION

(Month) (Day) (Year)

CONTINUATION SHEET RECEIVED

Page _____ of _____ pages

DO NOT WRITE ABOVE THIS LINE. FOR COPYRIGHT OFFICE USE ONLY

IDENTIFICATION OF CONTINUATION: This sheet is a continuation of Space 1 and Space 5 of the application for renewal registration on Form RE, submitted for the following:

A
Identification
of
Application

- TITLE AT SPACE 2 OR TITLE OF FIRST OF GROUP OF WORKS IN WHICH RENEWAL IS CLAIMED: (Give first title as given in Space 5 of Form RE)
.....
- RENEWAL CLAIMANT AND ADDRESS: (Give the name and address of at least one renewal claimant as given in Space 1 of Form RE)
.....

B
Continuation
of Space 1

RENEWAL CLAIMANT(S), ADDRESS(ES), AND STATEMENT OF CLAIM: (See Instructions on basic Form RE)

<input type="checkbox"/>	Name
<input type="checkbox"/>	Address
	Claiming as
<input type="checkbox"/>	Name
<input type="checkbox"/>	Address
	Claiming as
<input type="checkbox"/>	Name
<input type="checkbox"/>	Address
	Claiming as
<input type="checkbox"/>	Name
<input type="checkbox"/>	Address
	Claiming as
<input type="checkbox"/>	Name
<input type="checkbox"/>	Address
	Claiming as

Use the reverse side of this sheet if you need more space for continuation of Space 5 of the basic form.

☐

Title of Contribution:
Title of Periodical: Vol. No. Issue Date
Date of Publication: Registration Number:

(Month) (Day) (Year)

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(Month) (Day) (Year)

C

Continuation
of
Space 5

MAIL
TO

Certificate
will be
mailed in
window
envelope

Name ▼

Number/Street/Apt ▼

City/State/ZIP ▼

YOU MUST:
• Complete all necessary spaces
• Sign your application in Space 7

**SEND ALL 3 ELEMENTS
IN THE SAME PACKAGE:**

1. Application form
2. Nonrefundable \$20 filing fee
in check or money order
payable to *Register of Copyrights*

MAIL TO:
Register of Copyrights
Library of Congress
Washington, D.C. 20559-6000

D

Address for
return of
certificate