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NOV 06 2023

REGISTRY NUMBER:

in accordance with Oregon Revised Statute 192.410-192.490, the Information on this application is public record. We must release this information to all parties upon request. For office use only Please Type or Print Legibly in Black ink. Attach additional Sheets if Necessary. 1) CORRESPONDENT NAME: MAILING ADDRESS: Stephanie A. Schor, Sr. AAG Business Transactions, General Counsel, 1162 Court St. NE Salem OR 97301 2) APPLICANT'S NAME: (Owner: Individual or Entity) ADDRESS: 400 High St. SE Salem, OR 97312 SAIF Corporation 3) If the Applicant Is an Entity, Enter the State of Formation: 4) If ENTITY IS A PARTNERSHIP, LIST NAMES OF GENERAL PARTNERS: 5) DESCRIPTION OF TRADE OR SERVICE MARK: (Include all words, designs and borders that comprise the mark) (Attach additional page if needed.) On the Job for Oregon 6) SPECIMEN OF MARK IS REQUIRED: Attach a drawing or photocopy of the mark as it is actually used to this application. 7) GOODS OR SERVICES WITH WHICH THE MARK IS USED: (Examples of goods are pizzas, shirts; examples of services are serving food and selling clothing.) Claims administration in the field of workers' compensation. Providing information in the field of workers' compensation, Providing information regarding workers' compensation insurance policy rates. 8) EXPLAIN MODE OR MANNER IN WHICH THE MARK IS USED: (Example: on goods, tags, labels, containers, etc.) In print or digital format, including on websites, advertising, signage, etc. 9) CLASS NUMBER(S) OF GOODS OR SERVICES: (See form 290-a) 10) DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED ANYWHERE BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST: June 1, 1995 11) DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED IN OREGON BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST: June 1, 1995 12) EXECUTION: I, the applicant, own the mark, the mark is in use, and no other person has registered the mark with the federal government or in Oregon or has the right to use the mark or a mark that so resembles the mark as to be likely to cause confusion or mistake or deceive when applied to the goods or services of the other person. I declare under penalties of perjury that this application is true, correct and complete, (If applicant is an entity, a member of a firm, officer of the corporation, officer of the limited liability company, or officer of an association must sign.) Signature: Stephanie Antonia Schor August 29, 2023. Senior Asst Attorney General

CONTACT NAME: (To resolve questions with this filling.) Stephanie A. Schor, Sr. AAG PHONE NUMBER: (Include area code.) 503-302-1246



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