

Please type a plus sign (+) inside this box →

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No. _____
	First Inventor or Application Identifier _____
	Title _____
	Express Mail Label No. _____

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
--	---

1.  \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2.  Specification [Total Pages  ]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3.  Drawing(s) (35 U.S.C. 113) [Total Sheets  ]
4.  Oath or Declaration [Total Pages  ]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 17 completed)  
**[Note Box 5 below]**
    - i.  DELETION OF INVENTOR(S)  
 Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).
5.  Incorporation By Reference (useable if Box 4b is checked)  
 The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6.  Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a.  Computer Readable Copy
  - b.  Paper Copy (identical to computer copy)
  - c.  Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS	
8.	<input type="checkbox"/> Assignment Papers (cover sheet & document(s))
9.	<input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>
10.	<input type="checkbox"/> English Translation Document (if applicable)
11.	<input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
12.	<input type="checkbox"/> Preliminary Amendment
13.	<input type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>
14.	<input type="checkbox"/> * Small Entity Statement filed in prior application, (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired
15.	<input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
16.	<input type="checkbox"/> Other: .....

\* NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

**17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:**

Continuation     Divisional     Continuation-in-part (CIP)    of prior application No: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

**18. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label    or     Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name		State		Zip Code	
Address		City		Telephone	
Country		Fax			

Name (Print/Type)	Registration No. (Attorney/Agent)
Signature	Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.