REQUEST FOR REEXAMINATION TRANSMITTAL FORM

Address to:

Assistant Commissioner for Patents
Box Reexam
Washington, D.C. 20231

Attorney Docket No.  Date:

1. □ This is a request for reexamination pursuant to 37 CFR 1.510 of patent number ___________ issued ______________________. The request is made by:
   □ patent owner. □ third party requester.

2. □ The name and address of the person requesting reexamination is:
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

3. □ a. A check in the amount of $______ is enclosed to cover the reexamination fee, 37 CFR 1.20(c); or
   □ b. The Commissioner is hereby authorized to charge the fee as set forth in 37 CFR 1.20(c) to Deposit Account No. ____________.

4. □ Any refund should be made by □ check or by □ credit to Deposit Account No. ____________.
   37 CFR 1.26(c)

5. □ A cut-up copy of the patent to be reexamined with a single column of the printed patent securely mounted on one side of a separate paper or a permanent reproduction thereof is enclosed. 37 CFR 1.510(b)(4)

6. □ A copy of any disclaimer, certificate of correction or reexamination certificate issued in the patent is included.

7. □ Reexamination of claim(s) ________________________________ is requested.

8. □ A copy of every patent or printed publication relied upon is submitted herewith including a listing thereof on Form PTO-1449.

9. □ An English language translation of all necessary and pertinent non-English language patents or printed publications is included.

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Burden Hour Statement: This form is estimated to take 2.0 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 Reexam, Washington, DC 20231.
10. □ The attached detailed request includes at least the following items:
   a. A statement identifying each substantial new question of patentability based on prior patents and
      printed publication. 37 CFR 1.510(b)(1)
   b. An identification of every claim for which reexamination is requested, and a detailed explanation of the
      pertinency and manner of applying the cited prior art to every claim for which reexamination is
      requested. 37 CFR 1.510(b)(2)

11. □ A proposed amendment is included (only where the patent owner is the applicant). 37 CFR 1.510(e)

12. □ a. It is certified that a copy of this request (if filed by other than the patent owner) has been
      served in its entirety on the patent owner as provided in 37 CFR 1.33(c).
      The name and address of the party served and the date of service are:
      _____________________________________________________________________
      _____________________________________________________________________
      _____________________________________________________________________
      Date of Service: ______________________________; or
      □ b. A duplicate copy is enclosed since service was not possible.

13. □ The requester's correspondence address (if different from Number 2 above):
      _____________________________________________________________________
      _____________________________________________________________________
      _____________________________________________________________________

14. □ The patent is currently the subject of the following concurrent proceeding(s):
    □ a. Copending reissue application Serial No. ________________________.
    □ b. Copending reexamination Control No. ________________________.
    □ c. Copending Interference No. ________________________.
    □ d. Copending litigation styled:
      _____________________________________________________________________
      _____________________________________________________________________
      _____________________________________________________________________

__________________________________________
Authorized Signature

__________________________________________
Date

□ For Patent Owner Requester
□ For Third Party Requester