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|   | Filing Date          |  |
|   | First Named Inventor |  |
|   | Art Unit             |  |
|   | Examiner Name        |  |
|   | Title                |  |

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I am the Inventor.

**SIGNATURE of Inventor**

|           |           |
|-----------|-----------|
| Signature | Date      |
| Name      | Telephone |

**NOTE:** Signatures of all the inventors are required. Submit multiple forms if more than one signature is required, see below\*. See 37 CFR 1.4 for signature requirements and certifications.

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