

<b>CERTIFICATION OF PRO BONO REPRESENTATION</b> (Page 1 of 1)			
First Named Inventor		Application Serial Number (if known)	
Title of Invention			
THE UNDERSIGNED ATTORNEY HEREBY VOLUNTARILY CERTIFIES THE FOLLOWING:			
<input type="checkbox"/> I am submitting a filing for the above-identified application pro bono.			
Signature		Date	
Name (Print/Typed)		Practitioner Registration Number	
<b>Note:</b> This form must be signed in accordance with 37 CFR 1.33. Please see 37 CFR 1.4(d) for signature requirements and certifications. Submit multiple forms if more than one signature is required and indicate below the total number of forms submitted.*			
<input type="checkbox"/> *Total of _____ forms are submitted.			

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

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