

DECLARATION FOR CONTINUATION-IN-PART DESIGN PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed (i.e., a claimed invention in the application) and for which a patent is sought, namely the design entitled: _____

described and claimed in the specification:

Check one

- * a. attached hereto.
 b. filed on _____ as Application Serial No. _____.

and that this application in part discloses and claims subject matter disclosed in the earlier filed pending application, Application No. _____, filed _____.

The application was made or authorized to be made by me (each of us).

I have reviewed and understand the contents of the above-identified application, including the claim, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Authorization To Permit Access To Application by Participating Offices

The undersigned hereby grants the USPTO authority to provide the European Patent Office (EPO), the Japan Patent Office (JPO), and any other intellectual property offices in which a foreign application claiming priority to the above-identified application is filed access to the above-identified patent application. See 37 CFR 1.14(c) and (h).

In accordance with 37 CFR 1.14(h)(3), please provide access to a copy of the application-as-filed with respect to: 1) the above-identified application, 2) any foreign application to which the above-identified application claims priority under 35 USC 119(a)-(d) if a copy of the foreign application that satisfies the certified copy requirement of 37 CFR 1.55 has been filed in the above-identified US application, and 3) any U.S. application from which benefit is sought in the above-identified application.

In accordance with 37 CFR 1.14(c), access may be provided to information concerning the date of filing the Authorization to Permit Access to Application by Participating Offices.

Priority Benefit

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to said earlier filed pending application are hereby claimed:

The following applications for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to said earlier filed pending application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

As to any and all subject matter of this application which is not common to said earlier application, I acknowledge my duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

PAGE 3 OF U.S.A. DECLARATION FORM

1 ***Typewritten Full Name of Fourth Joint Inventor (if any)*** _____
Given Name Middle Initial Family Name

2 ****Inventor's Signature:** _____

3 ****Date of Signature:** _____
Month Day Year

Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address: _____
(Insert complete mailing address, including country) _____

1 ***Typewritten Full Name of Fifth Joint Inventor (if any)*** _____
Given Name Middle Initial Family Name

2 ****Inventor's Signature:** _____

3 ****Date of Signature:** _____
Month Day Year

Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address: _____
(Insert complete mailing address, including country) _____

1 ***Typewritten Full Name of Sixth Joint Inventor (if any)*** _____
Given Name Middle Initial Family Name

2 ****Inventor's Signature:** _____

3 ****Date of Signature:** _____
Month Day Year

Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address: _____
(Insert complete mailing address, including country) _____

1 ***Typewritten Full Name of Seventh Joint Inventor (if any)*** _____
Given Name Middle Initial Family Name

2 ****Inventor's Signature:** _____

3 ****Date of Signature:** _____
Month Day Year

Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address: _____
(Insert complete mailing address, including country) _____

*If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).
**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.