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PATENT NUMBER (if known)	APPLICATION NUMBER
Completed by (check one):	
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) is enclosed or was filed on	_____ Date
_____ (Date)	_____ Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. If the assignee is a juristic entity, this form must be signed by a patent practitioner (attorney or agent) of record. Submit multiple forms if more than one signature is required (see below*).	
*Total of _____ PTO/SB/47 forms are submitted	

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If you need assistance in completing this form, please call 1-800-PTO-9199 and then select option 2.

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