

The United States Patent and Trademark Office
PATENT TRIAL AND APPEAL BOARD



Third Party Requester's Representative	Appeal No:	201X-XXX,XXX
123 MAIN STREET	Appellant:	XXXXXXXX, PATENT OWNER
New York, NY 10004	Reexam Control No:	95/XXX,XXX
	Hearing Room:	B
	Hearing Docket:	A
	Hearing Date:	Wednesday, June 18, 201X
	Hearing Time:	2:00 PM
	Location:	Madison Building - East Wing 600 Dulany Street, 9th Floor Alexandria, Virginia 22313-1450

**NOTICE OF HEARING
RESPONSE REQUIRED WITHIN 21 DAYS**

Your attention is directed to 37 CFR § 41.73. The above identified appeal will be heard by the Patent Trial and Appeal Board on the date indicated. Hearings will commence at the time set, and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. **The time allowed for argument is 30 minutes** for each appellant or respondent who has requested an oral hearing, unless additional time is requested and approved before the argument commences. **As the hearing relates to an appeal of a reexamination, the hearing will be open to the public.**

Pursuant to § 41.73(d), if any other party to the appeal desires to participate in the oral hearing, but did not request an oral hearing pursuant to § 41.73(d), i.e., within two months after the mailing date of the Examiner's Answer, then this other party will be permitted to participate in the hearing by filing a separate request for oral hearing and the fee set forth in 37 C.F.R. § 41.20(b)(3) within 21 DAYS of the mailing date of this Notice, as well as a confirmation of attendance at the oral hearing.

CONFIRMATION OF ATTENDANCE OR WAIVER OF THE HEARING IS REQUIRED WITHIN 21 DAYS OF THE MAILING DATE OF THIS NOTICE. Failure to respond will be treated as a waiver of your request to participate in the oral hearing. If you are no longer interested in participating in the oral hearing, you must still file a waiver of oral hearing with the Board. This allows the panel to promptly act on the appeal without waiting for the oral hearing date.

Confirmation or waiver of the hearing should be indicated by completing the form below and returning it to the Board. This form may be filed with the Board by any one of the following three alternative methods:

1. **PREFERRED:** Via the USPTO Electronic Filing System (EFS) at

<http://www.uspto.gov/patents/process/file/efs/>

Appeal Number: [FormattedCaseNumber]
Reexamination Control Number: [FormattedApplNum]

2. Facsimile transmitted to: The USPTO Central fax number (official copy): **(571) 273-8300**
and the PTAB Hearing fax number (courtesy copy): **(571) 273-9797.**

3. By mail at the PTAB mailing address: Patent Trial and Appeal Board
United States Patent and Trademark Office
P.O. BOX 1450
Alexandria, Virginia 22313-1450

In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE:

- I previously filed my oral hearing request pursuant to 37 C.F.R. § 41.73(b).
- I am now filing my initial request to participate in the oral hearing pursuant to 37 C.F. R. § 41.73(d). A request for oral hearing and the fee set forth in 37 C.F.R. § 41.20(b)(3) are either attached to this hearing communication or have already been submitted.

CHECK ONE:

- IN-PERSON HEARING - ATTENDANCE CONFIRMED (*EFS-Web selection: Confirmation of Hearing by Appellant*)
- TELEPHONIC HEARING - ATTENDANCE CONFIRMED (*EFS-Web selection: Confirmation of Hearing by Appellant*)
- VIDEO HEARING - ATTENDANCE CONFIRMED (*EFS-Web selection: Confirmation of Hearing by Appellant*)
- HEARING ATTENDANCE WAIVED (*EFS-Web selection: Waiver of Hearing by Appellant*)

To aid the oral hearings staff in scheduling hearing rooms, please indicate the total number of participating and observing attendees if more than three are expected: _____
To aid the judges in determining whether any conflicts exist that may require a recusal, please list in the 'Comments' section the names of any additional person(s) who will be participating in the oral hearing. (Upon arrival, all persons presenting arguments must sign in at the Usher's desk.)

Comments/Special Requests:

Appeal Number: [FormattedCaseNumber]
Reexamination Control Number: [FormattedApplNum]

Typed or Printed Name of Attorney/Agent/Appellant

Registration No.

PATENT OWNER THIRD PARTY REQUESTER

Signature of Attorney/Agent/Appellant

Date

The 'Hearings' tab of the PTAB webpage <http://www.uspto.gov/ip/boards/bpai/index.jsp> provides additional information about oral hearings.

Please direct other inquiries to the PTAB Hearings Clerk at 571-272-9797.

cc: Patent Owner

Patent Owner's Representative
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