


INVENTION DISCLOSURE FORM

	TITLE OF APPLICATION:	
	STLGip DOCKET NO.	
	Total # Pages by Provided by Applicant:	
	Date Submitted:	

WHY THIS FORM: Invention Disclosure Form is document written by a scientist or engineer for use by a company's patent department its outside patent attorney, to determine whether patent protection should be sought for the described invention and serves as the basis for preparing such a document. The form in and of itself is not of significance, rather the content it aims to elicit. The more complete a picture it contains, the more informed the decision and the final work product will be.

INSTRUCTIONS: Fill each relevant section with the requested information or enter "NONE" as appropriate. Where amount of space on the form is insufficient, enter "see attached page" and use plain pages as needed. If you have any questions, contact us at (866) 325-7964 or via e-mail at info@stlgip.com.

NOTICE

The information provided in this form is for informational purposes only and is not intended to be legal advice or legal opinion.

The presentation of information in this form, or unsolicited contact with the firm, does not establish any form of attorney-client relationship with our firm, which will only be established after the firm and the client enter into a written engagement letter.

If you are interested in legal or consulting services, no services will be provided and no representation will be undertaken except after both parties have entered into a written representation agreement and the payment of the required retainer.

As such, if the firm has not been retained, please do not disclose more than necessary for an initial cursory review (limit to non-proprietary – non-confidential information).

INSTRUCTIONS

INSTRUCTIONS: Fill each relevant section with the requested information or enter "NONE" or "NA (Not Applicable)" as appropriate. Where amount of space on the form is insufficient, enter "see attached page" and use plain pages as needed. Please write the TOTAL number of pages (including any additional pages you may have appended) in the space provided above. If you have any questions, contact us at (866) 325-7964 or via e-mail at MYDOCKET@stlgip.com.

DUTY OF DISCLOSURE: Under the U.S. patent law, you have an ongoing duty to disclose any documents or activities of which you are aware that may be of interest to the examiner during the prosecution of your application in the U.S. Patent & Trademark Office (USPTO). If you are unsure of the pertinence of a document or activity, please provide it for evaluation. This is an ongoing obligation for the duration of the pendency of the application until it is issued into a patent.

ALSO NOTE, that you have a duty to inform the Patent Office of the following activities if they occurred more than one year prior to the U.S. filing date:

- (1) any publication or written disclosure made by you to persons outside your company which was not subject to a confidentiality obligation with respect to the information;
- (2) any public use which was made of the invention; and
- (3) any sales activities or offerings for sale of the invention.
- (4) any public disclosure by a third party at any time.

PLEASE advise of any documents or activities that should be reported to the USPTO as soon as possible but no later than when the draft application is returned.

The final patent application will reflect only the person listed in this document as an inventor, unless discussed and changed otherwise.

PART I. IDENTIFYING INFORMATION

I.A. PERSON SUBMITTING THE FORM

FULL NAME	
ARE YOU AN INVENTOR	<input type="checkbox"/> Yes <input type="checkbox"/> No
BUSINESS TELEPHONE	
CELL PHONE	
E-MAIL ADDRESS	

I.B. OWNER/ASSIGNEE/APPLICANT

DO THE INVENTOR(S) OWN THE PATENT RIGHTS TO THIS INVENTION (CHECK ONE).	<input type="checkbox"/> Yes <input type="checkbox"/> No
IS THE ASSIGNEE ALSO THE APPLICANT?	<input type="checkbox"/> Yes <input type="checkbox"/> No
APPLICANT MAILING ADDRESS	
APPLICANT PHYSICAL ADDRESS (if different than mailing address)	
APPLICANT TELEPHONE	
APPLICANT EMAIL ADDRESS	
APPLICANT ENTITY SIZE – SELECT ONE.	<input type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> Micro Entity
PLEASE PROVIDE THIS INFORMATION FOR THE APPLICANT.	Signatory Title Signatory Name
IF APPLICANT IS NOT THE ASSIGNEE, PLEASE IDENTIFY THE <u>OWNER/ASSIGNEE</u> OF THE INVENTION, ADDRESS, TELEPHONE, AND CONTACT PERSON.	

PART II. APPLICATION INFORMATION

IS THIS APPLICATION SEEKING EXPEDITED PROSECUTION?	<input type="checkbox"/> Yes <input type="checkbox"/> No
IS THIS APPLICATION BEING FOREIGN FILED?	<input type="checkbox"/> Yes <input type="checkbox"/> No
ARE YOU REQUESTING NON-PUBLICATION? (only if you don't plan to foreign file and only available at time of filing)	<input type="checkbox"/> Yes <input type="checkbox"/> No
ARE YOU REQUESTING EARLY PUBLICATION? (earlier than the 18 months from priority)	<input type="checkbox"/> Yes <input type="checkbox"/> No
LIST THE DETAILS FOR ALL THE DOMESTIC (U.S.) APPLICATIONS THIS APPLICATION CLAIMS PRIORITY FROM.	
LIST THE DETAILS FOR ALL THE FOREIGN (NON-U.S.) APPLICATIONS THIS APPLICATION CLAIMS PRIORITY FROM.	
DO THE PRIORITY APPLICATIONS HAVE AT LEAST ONE INVENTOR IN COMMON WITH THIS APPLICATION?	<input type="checkbox"/> Yes <input type="checkbox"/> No

PART III. INVENTOR INFORMATION

*For each inventor, provide the following.
Identify the key inventor to whom questions can be directed.*

Full Legal Name: (Last, First, Middle)	EMPLOYER	MAILING ADDRESS	TELEPHONE	E-MAIL ADDRESS	COUNTRY OF RESIDENCY	CITIZENSHIP

PART IV. REFERENCES FOR DISCLOSURE

REF. #	CITATION NO.	DOCUMENT NUMBER	ISSUE DATE/PUBLICATION DATE	NAME OF APPLICAN/TPATENEE	RELEVANT PAGE/LINE NUMBERS	DISCLOSED DURING PREPARATION STAGE?
						<input type="checkbox"/> Yes <input type="checkbox"/> No

PART V. INVENTION INFORMATION

A. INVENTION CATEGORY

Please categorize the potential uses of your invention below by checking all anticipated uses (check one or more):

<input type="checkbox"/> Service	<input type="checkbox"/> Product – therapeutic
<input type="checkbox"/> Product – device	<input type="checkbox"/> Product – method
<input type="checkbox"/> Research – reagent	<input type="checkbox"/> Drug – identification
<input type="checkbox"/> Diagnostic – test	<input type="checkbox"/> Other

B. DESCRIPTIVE INVENTION TITLE

C. DISCLOSURE OF THE INVENTION (For Software Specific Inventions, and Bio Specific Invention, Please Also Review and Complete PART VII.A. and VII.B, respectively)

Please answer the following to the best you can. Figures and flow charts are particularly important and useful.

TOPICS	ANSWERS
<ul style="list-style-type: none"> • PURPOSE. State the purpose of the invention. What were the goals of this invention? • What problem are you solving with this invention? 	
<ul style="list-style-type: none"> • PRIOR KNOWLEDGE. Describe the previous old methods, materials or apparatus used by others to perform the purpose of the invention. • Prior knowledge may be patent publications, websites, literature, conference, products or other information that you may be aware of. 	
<ul style="list-style-type: none"> • PRIOR KNOWLEDGE LIMITATIONS. What are the limitations/disadvantages of how, the 	

<p>same or similar objective/purpose (as of the present invention) have been delivered by current industry or academic knowledge and know-how.</p>	
<ul style="list-style-type: none"> • PRIOR KNOWLEDGE SHORTCOMINGS. What are the shortcomings of achieving the same goal/purpose (as that of the present invention) using the current industry or academic knowledge and know-how? 	
<ul style="list-style-type: none"> • PRIOR KNOWLEDGE REASONS FOR THE SHORTCOMINGS. If the purpose has not been achieved using the current industry or academic knowledge and know-how, why is that? What have been the barriers preventing or making it difficult for others to deliver. 	
<ul style="list-style-type: none"> • PLEASE DESCRIBE THE INVENTION IN DETAIL. Attach a full description of the invention. 	
<ul style="list-style-type: none"> • TECHNICAL PROBLEM. What technical problem did I solve? 	
<ul style="list-style-type: none"> • NEW FEATURES. Identify the features of the invention believed to be new. 	
<ul style="list-style-type: none"> • ADVANTAGES. State the advantages of the invention over the Prior/current Existing Technology described above. (e.g., cheaper, faster, or more reliable). • How is my solution better than the prior art? 	
<ul style="list-style-type: none"> • NEW CAPABILITES. What capability does this provide and why is it useful? 	
<ul style="list-style-type: none"> • OPERATING PRINCIPLE OF INVENTION. What is the invention's operating principle? 	
<ul style="list-style-type: none"> • OPERATING PRINCIPLE DIFFERENCES. Is there an operating principle that represents a departure from the operating principles of state-of-the-art equipment? 	

<ul style="list-style-type: none"> • SYSTEM DIAGRAM. Is there a system diagram showing the major components? • Detailed figures taken along different lines, and views will be very helpful. 	
<ul style="list-style-type: none"> • COMPONENT DIAGRAM. Is there a component diagram showing the actual stepper circuitry? 	
<ul style="list-style-type: none"> • PHYSICAL STRUCTURE. Describe the physical structure of your invention. • <u>Sketches, photos, or other illustrations should be attached to this form to fully illustrate your invention.</u> 	
<ul style="list-style-type: none"> • PROCESSES OF MAKING. How would you assemble the product? Please provide details. For example, what would connect to what in what order? 	
<ul style="list-style-type: none"> • OPERATION/FUNCTION/USE. How would you use the device/system? 	
<ul style="list-style-type: none"> • APPLICATIONS. What are applications of my invention besides solving my specific technical problem or in the particular market in which I plan to sell my product? 	
<ul style="list-style-type: none"> • OTHER FIELDS. Is my invention applicable to other technical fields, other than the one I am working in? What are they? 	
<ul style="list-style-type: none"> • MATERIAL. What are the materials from which each component will be made? 	
<ul style="list-style-type: none"> • ALTERNATIVES. Indicate any alternatives to the components, methods, materials, etc. as listed above. What are variants of my invention? Think broader than the specific technical problem that you solved. • For example, this design may be the most commercially feasible and robust design, but if a competitor were to try and "design around" the invention, what that design might look like? 	

ANY ADDITIONAL INFORMATION THAT MIGHT BE RELEVANT	

PART VI. OTHER SIGNIFICANT INFORMATION

1. OTHER PARTIES OF INTEREST. Please check if invention was developed under:

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University Contract or Government Agreement or Joint Development

2. JURISDICTIONS/MARKETS OF INTEREST: Please indicate any foreign countries within which you would suggest that the application should be filed, and why (e.g., market of interest, place of manufacture, competitor’s place of manufacture).

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3. RELATED PATENTS OR APPLICATIONS. List any related patents or patent applications of yours.

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4. OTHER INFORMATION: Please Include any other information you believe we should be made aware of:

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5. SIGNIFICANT DATES: When did you first think of the idea for your invention? Do you have any documentation of that date? If so, please identify.

A. Conception of the Invention:	Date
Documentation:	
B. When the invention was first reduced to practice:	Date

6. USE/DISCLOSURE/ACTIVITIES (IMPORTANT): Please answer the following questions:

A. Have you described or shown your invention to anyone?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
B. Have you made any attempts to commercialize your invention (for example, have you approached any companies about purchasing or manufacturing your invention)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
C. Has your invention been described in any printed publication, or any other form of media, such as the Internet?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
D. Have you used, or do you plan to use, the invention in commerce?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
E. Have you attempted to manufacture or sell your invention, or offered it for sale?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
F. Are there any witnesses who can corroborate the making of the invention, from the early days of conception to the reduction to practice? Please give their names, addresses and/or telephone numbers.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
G. Have you conducted any prior art searches?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

If you have answered yes to any of the above questions, please give full details of the activity, including dates when activities have occurred. Please indicate if party(ies) were under obligation of confidentiality.

PART VII.A.

SOFTWARE SPECIFIC INVENTIONS

1. Programming language to create software

2. Required operating system and utilities

3. What application software is needed for the proper function of the software?

4. Hardware configuration Required for the proper function of the software

5. Code format recommend the software be distributed (e.g., object code only, object and source)

6. Does the software have a graphical user interface? Yes No

7. Is this off-the-shelf software or does it have to be customized for use by each customer?

8. What do you see as commercial uses of your software?

9. Do you anticipate the customer would need on-going maintenance and support? If yes, please explain.

10. The current state of the Software's development (fully functional, fully tested by developers, fully tested by someone else)

11. Please describe the likely end users of the software.

12. Please indicate (choose one) the anticipated distribution model for the current version of the software.

- Open Source License
- Beta Test License
- Academic Use License
- License to Company
- Software Reseller License

13. SOFTWARE MANUSCRIPT

Have you prepared a manuscript describing the technology (for example, for publication in a journal or exhibition or marketing material)? Yes No

A) If yes, the manuscript can be a large part of the disclosure. Please submit the manuscript along with:

- A fully completed Software Disclosure Form, and
- A short description of the invention (usually one page or less) specifically identifying the invention in broader terms that might not be appropriate for use in the manuscript, e.g., the general purpose of the invention, the improvements over existing methods, devices or materials, the best mode of utilizing the Software, and a description of the details necessary to understand the invention.

B) If you are not relying on a manuscript, use the following outline in preparing the disclosure:

- Background: briefly describe the work of others that has failed to solve the problem;
- Summary: describe the invention broadly and then again with more specificity;
- Description: provide experimental or other details to show how to make and use the invention;
- Figures: include drawings or graphs that are necessary to understand the invention.

PART VII.B.

BIO SPECIFIC INVENTIONS

1. Materials Used

If a material, whether biological or non-biological, from a secondary source is incorporated or was used in the research that lead to the development of the invention, was this material obtained from some source other than your laboratory? (check one) Yes No

If Yes:

a) What is (are) the material(s)?

a) If Yes, with whom?

b) Please specify the source of the material(s):

c) Was this material(s) covered by a Material Transfer Agreement, Sponsored Research Agreement, Collaboration Agreement, or any other type of agreement?

(check one) Yes No

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