Substitute for form 1449/PTO	Complete if Known		
Cascillate is it is in 1776/176	Application Number		
INFORMATION DISCLOSURE	Filing Date		
STATEMENT BY APPLICANT	First Named Inventor		
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Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²		
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Examiner	Date	
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