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Vorname (erster und zweiter Vorname, sofern zutreffend) Given Name (first and middle (if any))	Familienname oder Nachname Family Name or Surname
Unterschrift des Erfinders Inventor's Signature	Datum Date
Wohnort: Stadt Residence: City	Bundesland State
	Land Country
Straße u. Hausnr. Mailing Address	
Stadt City	Postleitzahl Zip
	Land Country
Name des zusätzlichen gemeinsamen Erfinders, sofern zutreffend: Name of Additional Joint Inventor, if any:	<input type="checkbox"/> Für diesen Erfinder, der nicht unterzeichnet hat, wurde ein Antrag gestellt A petition has been filed for this unsigned inventor
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