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ERKLÄRUNG DECLARATION	WEITERE(R) ERFINDER ADDITIONAL INVENTOR(S) Zusatzblatt Supplemental Sheet
	Seite _____ von _____ Page _____ of _____

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
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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ERKLÄRUNG - Zusätzliches Prioritäts-Datenblatt
DECLARATION – Supplemental Priority Data Sheet

Ausländische Anträge:
 Foreign applications:

Vorherige ausländische Antragsnummer(n) Prior Foreign Application Number(s)	Land Country	Ausländisches Antragsdatum Foreign Filing Date (MM/TT/JJJJ) (MM/DD/YYYY)	Priorität nicht beansprucht Priority Not Claimed	Beglaubigte Kopie beigefügt? Certified Copy Attached? JA N YES NO EIN	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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OMB Clearance and PRA Burden Statement for PTO/SB/02B

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