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POWER OF ATTORNEY TO ONE OR MORE OF THE JOINT INVENTORS AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	
	Filing Date	
	First Named Inventor	
	Art Unit	
	Examiner Name	
	Title	

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I hereby appoint the following joint inventor(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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I am the Inventor.

SIGNATURE of Inventor	
Signature	Date
Name	Telephone

NOTE: Signatures of all the inventors are required. Submit multiple forms if more than one signature is required, see below*. See 37 CFR 1.4 for signature requirements and certifications.

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