

To:

FROM:	LOCATION	TRANSMITTAL DATE
DISCLOSURE TITLE:	PRINT FULL NAME:	S.S.N.
ABSTRACT OF INVENTION: (Briefly state what it is and what it accomplishes, and point(s) of novelty)		

(If necessary, continue on Page 3)

INVENTOR PLEASE NOTE : You should send this sheet and executed disclosure (2&3) direct to ePATENTMANAGER.com. As to your invention, please answer each of the following:

	YES	NO
1) a. Was your invention conceived, made, or will it be made in the performance of a Government or other outside contract? If yes: Other Party _____ Contact No. _____	<input type="checkbox"/>	<input type="checkbox"/>
2) For this invention:		
a. Has it been tried experimentally?	<input type="checkbox"/>	<input type="checkbox"/>
b. Is future work planned?	<input type="checkbox"/>	<input type="checkbox"/>
c. Has it been put into use?	<input type="checkbox"/>	<input type="checkbox"/>
d. If not now in use, is it scheduled for use?	<input type="checkbox"/>	<input type="checkbox"/>
e. Has it been offered for sale or will it be within the next 6 months/12months?	<input type="checkbox"/>	<input type="checkbox"/>
f. Has it already been sold in the U.S. or abroad?	<input type="checkbox"/>	<input type="checkbox"/>
g. Has it been divulged, or is it scheduled to be so divulged within the next 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
h. If divulged, was it in confidence?	<input type="checkbox"/>	<input type="checkbox"/>
i. Has Prior Art search been performed?	<input type="checkbox"/>	<input type="checkbox"/>

For all yes responses, please list the appropriate letter a-h below, and provide detailed information including dates, customers, or other parties, etc. (If necessary, continue on page 3)

3) **NOTE:** As an inventor, you are under a duty to disclose all publicly available information you are aware of which is relevant to this invention, including patents, publications, or public uses. Please identify such information below. If the publication is other than an U.S. patent, attach a copy or send.

IMPORTANT: When complete, sign and date and have witnesses read, sign, and date this sheet and all description sheets. Attach all original sketches or descriptions signed, dated and witnessed or identify the permanent location thereof. Complete and attach transmittal sheet. Do not alter after signed and witnessed.

_____ 19 _____ 19 _____

DATE WHEN WRITTEN OR TYPED ON THESE SHEETS

LOCATION AND DATE OF EARLIER DESCRIPTION

**DISCLOSURE
TITLE:**

LIST RECORDS OF FIRST CONCEPTION AND DEVELOPMENT OF INVENTION SUCH AS FIGURING BOOK NUMBER AND PAGE, NOTEBOOKS, ETC.	LOCATION AND DATE OF RECORD

The date of first conception of this invention is _____ (fill in)
INVENTOR (S)

_____ (Print First Name Initial Last Name) Signature _____ Date of Signature _____ Location (where invention was conceived) _____ Home Address _____ Home Phone No. _____	_____ (Print First Name Initial Last Name) Signature _____ Date of Signature _____ Location (where invention was conceived) _____ Home Address _____ Home Phone No. _____	_____ (Print First Name Initial Last Name) Signature _____ Date of Signature _____ Location (where invention was conceived) _____ Home Address _____ Home Phone No. _____
_____ (Print First Name Initial Last Name) Signature _____ Date of Signature _____ Location (where invention was conceived) _____ Home Address _____ Home Phone No. _____	_____ (Print First Name Initial Last Name) Signature _____ Date of Signature _____ Location (where invention was conceived) _____ Home Address _____ Home Phone No. _____	_____ (Print First Name Initial Last Name) Signature _____ Date of Signature _____ Location (where invention was conceived) _____ Home Address _____ Home Phone No. _____

TWO WITNESSES PRINT OR TYPE NAME	WITNESSES SIGNATURE	DATE SIGNED	DATE EXPLAINED TO & UNDERSTOOD BY ME	LOCATION/DEPT.

If Explained To Witnesses Or Others Earlier, Identify Documents Or Other Circumstances Involved And Respective Dates

DISCLOSURE TITLE:

DESCRIPTION OF THE INVENTION (Typewritten, if possible)

INVENTOR (S) SIGNATURE (S)	DATE OF SIGNATURE	WITNESSES SIGNATURE	DATE OF SIGNATURE	DATE EXPLAINED & UNDERSTOOD BY ME

