

PATENT ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	Declaration: Entitlement to Apply for and be Granted a Patent, Page 6
CONVEYING PARTY DATA	
Name	Execution Date
Patrice Lucas	11/21/2008
Kai Schierholz	11/21/2008
RECEIVING PARTY DATA	
Name:	Nanoledge
Street Address:	Cap Alpha, Avenue de l'Europe
City:	Clapiers
State/Country:	FRANCE
Postal Code:	34830
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	12743782
CORRESPONDENCE DATA	
Fax Number:	(503)595-5301
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	(503) 595-5300
Email:	erin.vaughn@klarquist.com
Correspondent Name:	Lisa M. Caldwell
Address Line 1:	121 SW Salmon Street, Suite 1600
Address Line 4:	Portland, OREGON 97204
ATTORNEY DOCKET NUMBER:	3435-85321-01
NAME OF SUBMITTER:	Lisa M. Caldwell

Total Attachments: 7
 source=3435-85321-01_Entitlement#page1.tif
 source=3435-85321-01_Entitlement#page2.tif
 source=3435-85321-01_Entitlement#page3.tif

501333011

**PATENT
 REEL: 025206 FRAME: 0701**

CH \$40.00 12743782

source=3435-85321-01_Entitlement#page4.tif
source=3435-85321-01_Entitlement#page5.tif
source=3435-85321-01_Entitlement#page6.tif
source=3435-85321-01_Entitlement#page7.tif

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference (if desired) (12 characters maximum) **L80004438WO**

Box No. I TITLE OF INVENTION	
POLYMER CARBON NANOTUBE COMPOSITES	
Box No. II APPLICANT <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	Telephone No.
NANOLEDGE INC. 75 Boulevard de Mortagne, #121 Boucherville, Québec, J4B 6Y4 CANADA	Facsimile No.
	Applicant's registration No. with the Office
<input type="checkbox"/> E-mail authorization: Marking this check-box authorizes the receiving Office, the International Searching Authority, the International Bureau and the International Preliminary Examining Authority to use the e-mail address indicated in this Box to send, if the Office or Authority so wishes, advance copies of notifications in respect of this international application. (See also the Notes to Boxes Nos. II and III.)	E-mail address
State (that is, country) of nationality: CA	State (that is, country) of residence: CA
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
Box No. IV AGENT OR COMMON REPRESENTATIVE: OR ADDRESS FOR CORRESPONDENCE	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)	Telephone No.
YAMAC, Tuba; MANOLAKIS, Emmanuel; D'ORIO, Hélène; and CARRIER, Valérie Gowling Lafleur Henderson LLP 1 Place Ville Marie, 37th Floor Montreal, Québec Canada H3B 3P4	(514) 878-9641
	Facsimile No. (514) 878-1450
	Agent's registration No. with the Office
<input type="checkbox"/> E-mail authorization: Marking this check-box authorizes the receiving Office, the International Searching Authority, the International Bureau and the International Preliminary Examining Authority to use the e-mail address indicated in this Box to send, if the Office or Authority so wishes, advance copies of notifications in respect of this international application. (See also the Notes to Boxes Nos. II and III.)	E-mail address
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p> <p>Centre National de la Recherche Scientifique (CNRS) 3, rue Michel Ange 75016 Paris France</p>	<p>This person is:</p> <p><input checked="" type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
State <i>(that is, country)</i> of nationality: FR	State <i>(that is, country)</i> of residence: FR
<p>This person is applicant for the purposes of:</p> <p><input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p> <p>Ecole Nationale Supérieure de Chimie Montpellier (ENSCM) 8, rue École Normale 34296 Montpellier France</p>	<p>This person is:</p> <p><input checked="" type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
State <i>(that is, country)</i> of nationality: FR	State <i>(that is, country)</i> of residence: FR
<p>This person is applicant for the purposes of:</p> <p><input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p> <p>SCHIERHOLZ, Kai 628, rue des Ateliers Boucherville, Québec, J4B 7Y1 CANADA</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
State <i>(that is, country)</i> of nationality: DE	State <i>(that is, country)</i> of residence: CA
<p>This person is applicant for the purposes of:</p> <p><input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p> <p>LUCAS, Patrice 7018, rue de Normandville Montréal, Québec, H2S 2C3 CANADA</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
State <i>(that is, country)</i> of nationality: FR	State <i>(that is, country)</i> of residence: CA
<p>This person is applicant for the purposes of:</p> <p><input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.</p>	

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p> <p>BOUTEVIN, Bernard 1, rue Anselme Mathieu Montpellier 34090 FRANCE</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p>
<p>Applicant's registration No. with the Office</p>	
<p>State <i>(that is, country)</i> of nationality: FR</p>	<p>State <i>(that is, country)</i> of residence: FR</p>
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p> <p>GANACHAUD, François 274, rue du Stade Montpellier 34400 FRANCE</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p>
<p>Applicant's registration No. with the Office</p>	
<p>State <i>(that is, country)</i> of nationality: FR</p>	<p>State <i>(that is, country)</i> of residence: FR</p>
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p>
<p>Applicant's registration No. with the Office</p>	
<p>State <i>(that is, country)</i> of nationality:</p>	<p>State <i>(that is, country)</i> of residence:</p>
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p>Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p>
<p>Applicant's registration No. with the Office</p>	
<p>State <i>(that is, country)</i> of nationality:</p>	<p>State <i>(that is, country)</i> of residence:</p>
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
<p><input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.</p>	

Box No. V DESIGNATIONS				
<p>The filing of this request constitutes under Rule 4.9(a) the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents. However,</p> <p><input type="checkbox"/> DE Germany is not designated for any kind of national protection</p> <p><input type="checkbox"/> JP Japan is not designated for any kind of national protection</p> <p><input type="checkbox"/> KR Republic of Korea is not designated for any kind of national protection</p> <p><input type="checkbox"/> RU Russian Federation is not designated for any kind of national protection</p> <p><i>(The check-boxes above may only be used to exclude (irrevocably) the designations concerned if, at the time of filing or subsequently under Rule 26bis.1, the international application contains in Box No. VI a priority claim to an earlier national application filed in the particular State concerned, in order to avoid the ceasing of the effect, under the national law, of this earlier national application.)</i></p>				
Box No. VI PRIORITY CLAIM				
The priority of the following earlier application(s) is hereby claimed:				
Filing date of earlier application <i>(day/month/year)</i>	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application: regional Office	international application: receiving Office
item (1) 23 November 2007 (23.11.2007)	EP07301580	EP		
item (2)				
item (3)				
item (4)				
<input type="checkbox"/> Further priority claims are indicated in the Supplemental Box.				
<p>Transmit certified copy: the receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) <i>(only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office)</i> identified above as:</p> <p><input type="checkbox"/> all items <input type="checkbox"/> item (1) <input type="checkbox"/> item (2) <input type="checkbox"/> item (3) <input type="checkbox"/> item (4) <input type="checkbox"/> other, see Supplemental Box</p>				
<p>Restore the right of priority: the receiving Office is requested to restore the right of priority for the earlier application(s) identified above or in the Supplemental Box as item(s) (<u>CA</u>). <i>(See also the Notes to Box No. VI; further information must be provided to support a request to restore the right of priority.)</i></p>				
<p>Incorporation by reference: where an element of the international application referred to in Article 11(1)(iii)(d) or (e) or a part of the description, claims or drawings referred to in Rule 20.5(a) is not otherwise contained in this international application but is completely contained in an earlier application whose priority is claimed on the date on which one or more elements referred to in Article 11(1)(iii) were first received by the receiving Office, that element or part is, subject to confirmation under Rule 20.6, incorporated by reference in this international application for the purposes of Rule 20.6.</p>				
Box No. VII INTERNATIONAL SEARCHING AUTHORITY				
<p>Choice of International Searching Authority (ISA) <i>(if more than one International Searching Authority is competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):</i></p> <p>ISA/ <u>CA</u>.....</p>				

Continuation of Box No. VII USE OF RESULTS OF EARLIER SEARCH, REFERENCE TO THAT SEARCH		
<input type="checkbox"/> The ISA indicated in Box No. VII is requested to take into account the results of the earlier search(es) indicated below (<i>see also Notes to Box VII; use of results of more than two earlier searches</i>).		
Filing date (<i>day/month/year</i>)	Application Number	Country (<i>or regional Office</i>)
<input type="checkbox"/> Statement (Rule 4.12(ii)): this international application is the same, or substantially the same, as the application in respect of which the earlier search was carried out except, where applicable, that it is filed in a different language.		
<input type="checkbox"/> Availability of documents: the following documents are available to the ISA in a form and manner acceptable to it and therefore do not need to be submitted by the applicant to the ISA (Rule 12bis.1(f)):		
<input type="checkbox"/> a copy of the results of the earlier search,*		
<input type="checkbox"/> a copy of the earlier application,		
<input type="checkbox"/> a translation of the earlier application into a language which is accepted by the ISA,		
<input type="checkbox"/> a translation of the results of the earlier search into a language which is accepted by the ISA,		
<input type="checkbox"/> a copy of any document cited in the results of the earlier search. (<i>If known, please indicate below the document(s) available to the ISA</i>):		
<input type="checkbox"/> Transmit copy of results of earlier search and other documents (<i>where the earlier search was not carried out by the ISA indicated above but by the same Office as that which is acting as the receiving Office</i>): the receiving Office is requested to prepare and transmit to the ISA (Rule 12bis.1(c)):		
<input type="checkbox"/> a copy of the results of the earlier search,*		
<input type="checkbox"/> a copy of the earlier application,		
<input type="checkbox"/> a copy of any document cited in the results of the earlier search.		
<small>* Where the results of the earlier search are neither available from a digital library nor transmitted by the receiving Office, the applicant is required to submit them to the receiving Office (Rule 12bis.1(a)) (<i>See item 11, in the check-list and also Notes to Box No. VII</i>). </small>		
Filing date (<i>day/month/year</i>)	Application Number	Country (<i>or regional Office</i>)
<input type="checkbox"/> Statement (Rule 4.12(ii)): this international application is the same, or substantially the same, as the application in respect of which the earlier search was carried out except, where applicable, that it is filed in a different language.		
<input type="checkbox"/> Availability of documents: the following documents are available to the ISA in a form and manner acceptable to it and therefore do not need to be submitted by the applicant to the ISA (Rule 12bis.1(f)):		
<input type="checkbox"/> a copy of the results of the earlier search,*		
<input type="checkbox"/> a copy of the earlier application,		
<input type="checkbox"/> a translation of the earlier application into a language which is accepted by the ISA,		
<input type="checkbox"/> a translation of the results of the earlier search into a language which is accepted by the ISA,		
<input type="checkbox"/> a copy of any document cited in the results of the earlier search. (<i>If known, please indicate below the document(s) available to the ISA</i>):		
<input type="checkbox"/> Transmit copy of results of earlier search and other documents (<i>where the earlier search was not carried out by the ISA indicated above but by the same Office as that which is acting as the receiving Office</i>): the receiving Office is requested to prepare and transmit to the ISA (Rule 12bis.1(c)):		
<input type="checkbox"/> a copy of the results of the earlier search,*		
<input type="checkbox"/> a copy of the earlier application,		
<input type="checkbox"/> a copy of any document cited in the results of the earlier search.		
<small>* Where the results of the earlier search are neither available from a digital library nor transmitted by the receiving Office, the applicant is required to submit them to the receiving Office (Rule 12bis.1(a)) (<i>See item 11, in the check-list and also Notes to Box No. VII</i>). </small>		
<input type="checkbox"/> Further earlier searches are indicated on a continuation sheet.		
Box No. VIII DECLARATIONS		
The following declarations are contained in Boxes Nos. VIII (i) to (v) (<i>mark the applicable check-boxes below and indicate in the right column the number of each type of declaration</i>):		Number of declarations
<input type="checkbox"/> Box No. VIII (i)	Declaration as to the identity of the inventor	:
<input checked="" type="checkbox"/> Box No. VIII (ii)	Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent	:
<input type="checkbox"/> Box No. VIII (iii)	Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application	:
<input type="checkbox"/> Box No. VIII (iv)	Declaration of inventorship (only for the purposes of the designation of the United States of America)	:
<input type="checkbox"/> Box No. VIII (v)	Declaration as to non-prejudicial disclosures or exceptions to lack of novelty	:
		1

Box No. VIII (ii) DECLARATION: ENTITLEMENT TO APPLY FOR AND BE GRANTED A PATENT

The declaration must conform to the standardized wording provided for in Section 212; see Notes to Boxes Nos. VIII, VIII (i) to (v) (in general) and the specific Notes to Box No. VIII (ii). If this Box is not used, this sheet should not be included in the request.

Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent (Rules 4.17(ii) and 51bis.1(a)(ii)), in a case where the declaration under Rule 4.17(iv) is not appropriate:

in relation to the present international application,

1) Nanoledge Inc. is entitled to apply for and be granted a patent by virtue of the following:

- Nanoledge was entitled as employer of the inventors, Patrice Lucas and Kai Schierholz;
- Nanoledge changed its name to NATEC on June 5, 2008;
- NATEC assigned its rights to Nanoledge Inc., on November 19, 2008.

2) Centre National De La Recherche Scientifique (CNRS) is entitled as employer of the inventor, Bernard Boutevin;

3) Ecole Nationale Supérieure de Chimie Montpellier (ENSCM) is entitled as employer of the inventor, François Ganachaud.

This declaration is continued on the following sheet, "Continuation of Box No. VIII (ii)".

Box No. IX CHECK LIST; LANGUAGE OF FILING		
<p>This international application contains:</p> <p>(a) on paper, the following number of sheets:</p> <p>request (including declaration and supplemental sheets) : 7</p> <p>description (excluding sequence listing and/or tables related thereto) : 36</p> <p>claims : 4</p> <p>abstract : 1</p> <p>drawings : 5</p> <hr/> <p>Sub-total number of sheets : 53</p> <p>sequence listing</p> <p>tables related thereto</p> <p><i>(for both, actual number of sheets if filed on paper, whether or not also filed in electronic form; see (c) below)</i></p> <hr/> <p>Total number of sheets : 53</p> <p>(b) <input type="checkbox"/> only in electronic form (Section 801(a)(i))</p> <p>(i) <input type="checkbox"/> sequence listing</p> <p>(ii) <input type="checkbox"/> tables related thereto</p> <p>(c) <input type="checkbox"/> also in electronic form (Section 801(a)(ii))</p> <p>(i) <input type="checkbox"/> sequence listing</p> <p>(ii) <input type="checkbox"/> tables related thereto</p> <p>Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the</p> <p><input type="checkbox"/> sequence listing:</p> <p><input type="checkbox"/> tables related thereto:</p> <p><i>(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)</i></p>	<p>This international application is accompanied by the following item(s) <i>(mark the applicable check-boxes below and indicate in right column the number of each item):</i></p> <p>1. <input checked="" type="checkbox"/> fee calculation sheet : 1</p> <p>2. <input type="checkbox"/> original separate power of attorney :</p> <p>3. <input type="checkbox"/> original general power of attorney :</p> <p>4. <input type="checkbox"/> copy of general power of attorney; reference number, if any:</p> <p>5. <input type="checkbox"/> statement explaining lack of signature :</p> <p>6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):</p> <p>7. <input type="checkbox"/> translation of international application into <i>(language):</i></p> <p>8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material :</p> <p>9. <input type="checkbox"/> sequence listing in electronic form <i>(indicate type and number of carriers)</i></p> <p>(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) :</p> <p>(ii) <input type="checkbox"/> <i>(only where check-box (b)(i) or (c)(i) is marked in left column)</i> additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter :</p> <p>(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column :</p> <p>10. <input type="checkbox"/> tables in electronic form related to sequence listing <i>(indicate type and number of carriers)</i></p> <p>(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) :</p> <p>(ii) <input type="checkbox"/> <i>(only where check-box (b)(ii) or (c)(ii) is marked in left column)</i> additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) :</p> <p>(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column :</p> <p>11. <input type="checkbox"/> copy of results of earlier search(es) (Rule 12bis.1(a)) :</p> <p>12. <input type="checkbox"/> other <i>(specify):</i></p>	<p>Number of items</p>
<p>Figure of the drawings which should accompany the abstract: 1</p>	<p>Language of filing of the international application: ENGLISH</p>	

Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE
Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

Tuba Yamac

For receiving Office use only	
<p>1. Date of actual receipt of the purported international application:</p> <hr/> <p>3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:</p> <hr/> <p>4. Date of timely receipt of the required corrections under PCT Article 11(2):</p> <hr/> <p>5. International Searching Authority (if two or more are competent): ISA /</p>	<p>2. Drawings:</p> <p><input type="checkbox"/> received:</p> <hr/> <p><input type="checkbox"/> not received:</p>
<p>6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid</p>	

For International Bureau use only

<p>Date of receipt of the record copy by the International Bureau:</p>
--