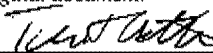


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4. A. Patent Application No.(s) <u>12/597,117</u> B. Patent No.(s)					
Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
C. Title of Application: <u>GERMINATION/GROWING APPARATUS AND PLANT CULTIVATION DEVICE</u>					
5. Name and address of party to whom correspondence concerning document should be mailed:  Name: <u>James A. Oliff</u>  Address: <b>OLIFF &amp; BERRIDGE, PLC</b> <b>P.O. Box 320850</b> <b>Alexandria, VA 22320-4850</b> <b>Phone Number: 703-836-6400</b> <b>Fax Number: 703-836-2787</b>			6. Total number of applications and patents involved: <u>1</u>  7. Please charge Deposit Account No. 15-0461 the total fee (37 CFR 3.41) in the amount of <u>\$40.00</u> .  8. Credit any overpayment or charge any underpayment to deposit account number 15-0461.		
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