

FEE TRANSMITTAL

37 CFR 1.136 or 1.366

| APPLICATION INFORMATION | |
|--------------------------------|---|
| Application Number (if known): | _____ |
| Filing Date (if known): | _____ |
| First Named Inventor: | Brian Rutherford |
| Attorney Docket Number: | RUTHERFORD-024-PROV |
| Title: | Neural Behavioral Authentication Engine for Identity Verification |
| Customer Number: | 210482 |

| FEES (37 CFR 1.16 - 2025 Fee Schedule) | | | |
|---|----------|------------|----------------|
| Fee Description | Fee Code | Fee Amount | Total Fee |
| Basic Filing Fee - Provisional Application (Micro Entity) | 1016 | \$65.00 | \$65.00 |
| TOTAL FEES DUE | | | \$65.00 |

| METHOD OF PAYMENT | |
|-------------------------------------|---|
| <input type="checkbox"/> | A check or money order is enclosed |
| <input type="checkbox"/> | The Director is authorized to charge my Deposit Account Number: _____ |
| <input type="checkbox"/> | The Director is authorized to charge the filing fees to Credit Card |
| <input checked="" type="checkbox"/> | Payment by EFS-Web |

| SIGNATURE | |
|-----------------------------------|--------------------|
| Signature: | /Brian Rutherford/ |
| Name (Print/Type): | Brian Rutherford |
| Date: | 08/27/2025 |
| Registration No. (if applicable): | N/A (Applicant) |
| Telephone: | (512)648-0219 |
| Customer Number: | 210482 |