ATE RECEIVED:	IP APPLICANT CODE:	
O BE FILLED OUT BY UC KTTO OFFIC	O5-0321-001	
APPLICANT / AUTHORSHIP INFORMATION SUPPLEMENTAL SHEET		
Type of ApplicantHeirAssignee Authorship	EmployerAuthor / Creator	
Name		
Place and Date of Birth/Incorporation		
Address		
City		
Contact No.		
E-Mail		
Citizenship		
Percent Contribution to Work (for Author/Creator)		
Name		
Place and Date of Birth/Incorporation		
Address		
City		
Contact No.		
E-Mail		
Citizenship		
Percent Contribution to		

Work (for Author/Creator)

Name	
Place and Date of Birth/Incorporation	
Address	
City	
Contact No.	
E-Mail	
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