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| RULE | | | | | |
| APPLICANTS Andrew B. Delvaux, Green Bay, WI; Joshua J. Dykla, Livonia, MI; Christopher J. Rivet, Grand Blanc, MI; Matthew T. Trombley, Concord, MI; Ryan J. Gilbert, Houghton, MI; Kristin Cauley, Oshkosh, WI; Kyle J. Marsh, Houghton, MI; Dennis Jensen, Olympia, WA; | | | | | |
| ** CONTINUING DATA ***** | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ** 12/31/2007 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and <u>/NICHOLAS F</u> <u>POLITO/</u> Acknowledged <u>Examiner's Signature</u> | <input type="checkbox"/> Met after Allowance <u>Initials</u> | STATE OR COUNTRY WI | SHEETS DRAWINGS 7 | TOTAL CLAIMS 29 | INDEPENDENT CLAIMS 3 |
| ADDRESS MICHAEL BEST & FRIEDRICH LLP 100 E WISCONSIN AVENUE Suite 3300 MILWAUKEE, WI 53202 UNITED STATES | | | | | |
| TITLE CPR FACILITATING MATTRESS | | | | | |
| FILING FEE RECEIVED 725 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |