

Patent Application Attorney Docket No.9838B

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 17th day of May 2006.

Ву

(Signature of person mailing)
Andrea E. Dorigo
Reg. No. 47,532
(Typed or printed name of person)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Curatolo et al.,

APPLICATION NO.: 10/310,232 : Examiner: Tran, S

FILING DATE: December 5 2002 : Group Art Unit: 1615

TITLE: CAPSULATED SOLUTION DOSAGE

FORMS OF SERTRALINE

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA. 22313-1450

Sir:

PETITION FOR EXTENSION OF TIME PURSUANT TO 37 C.F.R. §1.136(a)

Pursuant to the provisions of 37 C.F.R. §1.136(a), it is requested that the term for response to the Examiner's Action in this application, mailed on $\underline{11/23/05}$, and having an original period for response of $\underline{3}$ months, which expired on $\underline{02/23/06}$, be extended by $\underline{3}$ month(s), such that it expires on $\underline{\text{May 23, 2006}}$.

Authorization is hereby provided to charge the amount of \$1,020.00, as stated under 37 C.F.R. §1.17, as well as any additional fees required, or to credit any overpayment to Deposit Account No. 16-1445. Two copies of this paper are enclosed.

05/23/2006 SDENBOB1 00000066 161445 10310232

01 FC:1253 1020.00 DA

ъ.

Respectfully submitted,

Mr. Andrea E. Dorigo
Attorney for Applicant(s)

∠Reg. No. 47,532

Pfizer, Inc Patent Department, 5th Floor 150 East 42nd Street New York, NY 10017-5755 (212) 573-1898

PTO/SB/17 (12-04) Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OFCOMMERCE Effective on 12/08/2004 s pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818) Complete if Known **Application Number** 10/310,232 TRANSMITTAL Filing Date 12/05/2002 First Named Inventor Curatolo et al., for FY 2005 **Examiner Name** Susan T. Tran Applicant claims small status. See 37 CFR 1.27 Art Unit 1615 Attorney Docket No. Total Amount of Payment (\$) \$1,020.00 PC9838B METHOD OF PAYMENT (check all that apply) ☐ None Other (please identify):_ ☐ Check ■ Money Order Credit Card Deposit Account: Deposit Account number_ 16-1445 Deposit Account Name Pfizer Inc For the above identified deposit account, the Director is authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. M Charge any additional fee(s) or any underpayment of Credit any overpayments fee(s) under 37 CFR 1.1.6 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038 FEE CALCULATION 1. BASIC FILING FEE **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees paid Utility 300 200 100 1.000 150 500 250 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 200 100 0 n 0 Provisional 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 200 100 Each independent claim over 3 (including Reissues) Multiple dependent claims 360 180 **Total Claims Multiple Dependent Claims Extra Claims** Fee (\$) Fee Paid (\$) - 20 or HP= Fee Paid(\$) Fee (\$) HP= highest number of total claims paid for, if greater than 20 Indep. Claims Fee (\$) Fee Paid (\$) **Extra Claims** - 3 or HP= HP= highest number of total claims paid for, if greater than 3 If the specification and drawings exceed 100 sheets of paper, (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100= /50= (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) \$1,020.00 Other: Petition for Extension of Time Submitted Name (Printed/Type) 47,532 Telephone 212-733-1898 Andrea E. Dørigg Registration No. (Attorney Agent)

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and /or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-pto-9199 and select option2.

Signature