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| **REQUEST FOR PARTICIPATION IN****THE PATENT PROSECUTION HIGHWAY (PPH) PROGRAM** |
| 1. **Bibliographic Data**
 |
| Application Number (if known) |       |
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| 1. **Request**
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| **Applicant requests participation in the Patent Prosecution Highway (PPH) program based on:** |
| Office of Earlier Examination (OEE) |       |
| OEE Work Products Type |  | [ ] National/Regional Office Action(s) |
|  | [ ] WO-ISA, WO-IPEA or IPER |
| OEE Application Number(Incl. PCT Application Number) |       |
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| 1. **Required Documents**
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| **I. OEE Work Products and, if required, Translations** |
| 1. [ ]  A copy of OEE work products is attached; or
 |
| [ ]  The office is requested to retrieve documents via the Dossier Access System or PATENTSCOPE |
| 1. [ ]  A translation of documents in 1 in a language accepted by the Office is attached; or
 |
| [ ]  The office is requested to retrieve documents via the Dossier Access System or PATENTSCOPE |
| **II. Patentable/Allowable Claims Determined by OEE and, if required, Translations** |
| 1. [ ]  A copy of all claims determined to be patentable/allowable by OEE is attached; or
 |
| [ ]  The office is requested to retrieve documents via the Dossier Access System or PATENTSCOPE |
| 1. [ ]  A translation of documents in 3 in a language accepted by the Office is attached; or
 |
| [ ]  The office is requested to retrieve documents via the Dossier Access System or PATENTSCOPE |
| **III. Documents Cited in OEE Work Products (if required)** |
| 1. [ ]  A copy of all documents cited in OEE work products is attached (excluding patent documents); or

[ ]  no references cited |
| **IV. Previously submitted documents** |
| 1. [ ]  If any of the above mentioned documents have been submitted before, please specify:
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| 1. **Claims Correspondence**
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| [ ]  All the claims in the application sufficiently correspond to the patentable/allowable claims in the OEE application; or |
| [ ]  Claims correspondence is explained in the following table |
| Application Claims | Corresponding OEE claims | Explanation regarding the correspondence |
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| Name(s) of applicant(s) or representative(s) |       |
| Date |       |
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