

RICHARD L. MILLER, P.E.

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ADDRESS CORRESPONDENCE TO:

⇒ RICHARD L. MILLER
12 PARKSIDE DRIVE
DIX HILLS, N.Y. 11746-4879

(631) 499-4343

Fax: (631) 623-6377

Dear Inventor:

The first step in obtaining a patent is to have me perform a *Preliminary Patentability Search* to see if your invention appears to be patentable over prior US patents. In performing this search for you, I will look through appropriate classes of US patents and published patent applications. In your search report, you should receive the following:

1. A detailed listing of all relevant prior art U.S. Patent Documents found in the course of the search.
2. My opinion stating whether patent protection appears to be available for your invention.
3. If favorable, a description of the embodiment(s) of the invention believed patentable.
4. Specific advice about which type(s) of patent your invention would be eligible for, and what strategy would best protect your invention.
5. If unfavorable, a description of the specific prior art or legal reason which prevents patenting.

What You Need To Get Started

To perform your search, I will need the following from you:

1. A sketch and description of your invention so that I can understand how it works. *A hand-drawn sketch is normally sufficient*, but more information allows a more comprehensive search.
2. A completed Invention Record Form for your invention (pages 3 and 4 to be submitted).
3. My fee of \$299.00 US dollars for performing your search (Payment options on page 6).

*** TAKE ADVANTAGE ***

My latest policy allows you full credit for the search fee paid should you contract with me to prepare an application within one month's time of a favorable report.

Sincerely yours,



RICHARD L. MILLER, P.E.

RLM:p-1 Page 1 of 7

P.S. PLEASE SEE CONFIDENTIALITY AGREEMENT ON NEXT PAGE

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CONFIDENTIALITY AGREEMENT

I, Richard L. Miller, agree in advance to subscribe to the confidentiality agreement below in regard to all matters which are appropriately submitted to me for patent services. These include conducting a Preliminary Patentability Search, as well as the preparation, filing, and prosecution of patent applications.

I, Richard L. Miller, agree in advance that all materials disclosed by you to me are for the sole purposes of evaluating and/or possibly representing you before the United States Patent and Trademark Office and shall be maintained in **STRICT CONFIDENCE**, pursuant to the agent/attorney client privilege and further in accordance with Title 37, Part 10 of the Code of Federal Regulations.

I further agree in advance that I will not:

1. Reveal a confidence or secret of a client;
2. Use a confidence or secret of a client to the disadvantage of a client;
3. Use a confidence or secret of a client for the advantage of myself or of a third person, unless a client consents after full disclosure; or
4. Otherwise disclose a client's confidence or secret except where required by law under 37 CFR 10.57(c), another relevant regulation/statute, or court order.

Signed,



Richard L. Miller, P.E.

I have read, understood, and agreed to the above confidentiality agreement.

Signature, 1st Inventor

Date

Signature, 2nd Inventor (if any)

Date

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INVENTION RECORD FORM

Title of Invention: _____

1st Inventor:

First Name: _____ M.I. _____ Last Name: _____

Address: _____

City: _____, State/Prov.: _____ Zip/Post Code: _____

E-mail: _____ Home Phone: () _____ - _____

Cell Phone: () _____ - _____ Bus. Phone: () _____ - _____

2nd Inventor (if any):

First Name: _____ M.I. _____ Last Name: _____

Address: _____

City: _____, State/Prov.: _____ Zip/Post Code: _____

E-mail: _____ Home Phone: () _____ - _____

Cell Phone: () _____ - _____ Bus. Phone: () _____ - _____

I am (We are) sending you a sketch (and/or model) and description of my (our) invention described above, and requesting that you conduct a Preliminary Patentability Search through the appropriate classes of prior US patents, and advise whether or not in your opinion this invention may be patented. For this search service and report enclosed is your required fee of \$299.00 US dollars.

Signature, 1st Inventor Date

Signature, 2nd Inventor (if any) Date

Be Sure to Sign, Date and Answer Questions, 1, 2, and 3 on Page 4

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DO YOU HAVE MORE THAN ONE INVENTION?

Many inventors ask me if they can obtain better rates for services if they have more than one invention. I am pleased to say that the answer is yes! This is a great opportunity for a prolific inventor. The chart below shows the great rates available to you for multiple searches if you have more than one invention. Multiple searches can be purchased in advance at the discounted rate, and utilized anytime within a year from purchase. So even if not all your inventions are ready to be searched now, you can receive the discount.

Number of Inventions	Fee per search	Total fee
1	\$299.00	\$299.00
2	\$225.00	\$450.00
3	\$200.00	\$600.00
4	\$175.00	\$700.00
5	\$150.00	\$750.00
6	\$145.00	\$870.00
7	\$140.00	\$980.00
8	\$135.00	\$1080.00
9	\$130.00	\$1170.00
10	\$125.00	\$1250.00

All multiple searches are also creditable towards the preparation of Patent Applications should you contract me to prepare an application within one month's time of a favorable report.

I desire to take advantage of your offer for discounted multiple Preliminary Patentability Searches.

I am enclosing \$ _____ for the quantity of _____ searches in accordance with the chart, information and terms shown above.

Signature, 1st Inventor

Date

Signature, 2nd Inventor (if any)

Date

Pay online at <http://pto-ag.com/searchservice>

See Next Page for All Other Payment Options

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 Name as it appears on card: _____
 Billing Address: _____
 Card Number: _____, Exp: _____ / _____
 Security code: _____, Visa; MasterCard; American Express; Discover
 The undersigned guarantees performance of the financial provisions of this agreement.
Signature: _____ **Date:** _____
 _____ (initial) Being the authorized cardholder or the Corporate Officer, by signing above I understand and agree to the terms set forth in this agreement, agree to pay, and specifically authorize to charge my credit card for the services requested. I further agree that in the event my credit card becomes invalid, I will provide a new valid credit card upon request, to be charged for the payment of any outstanding balances owed.
 _____ (initial) Charges made for actual services performed by our office are non-refundable. In the event of pre-payment any unused funds will be refunded within 30 days of notification that services are no longer requested.
If cardholder is not an inventor:
 _____ (initial) By signing above I, _____, understand I am paying for legal fees on behalf of, _____, a client with this firm. I understand I will receive no direct benefit from this transaction or the legal services provided. I also understand I am waiving my right to dispute this charge with my bank for claims of services not received by cardholder or other similar claim of non-service.

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 Name as it appears on account: _____
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ROUTING # ⇒ ALWAYS A NINE DIGIT NUMBER

ACCOUNT # ⇒ LENGTH VARIES, USE ONLY THE SPACES NEEDED DO NOT ZERO FILL BLANK BOXES
 Inventor's name: _____
 Signature: _____ Date: _____

John D. Public Main Street Somewhere USA	Date: _____	963
Pay to the order of _____ \$ _____		dollars
Memo _____		
⑆101210564⑆	021001008⑆	963⑆
ROUTING #	ACCOUNT #	

OPTION 4 _____ Initial Here **Check or Money order** enclosed. Make checks payable to Richard L. Miller.

OPTION 5 _____ Initial Here **Wire Transfer** info:
 Chase Bank routing # 021000021 | Account #2920017486 | SWIFT # CHASUS33 | Bank Phone # 1-631-499-1812

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Dear Inventor:

You may print the envelope template on the following page for your added convenience.

After printing the envelope template - fold on the dotted lines in the numeric order indicated. The resulting envelope will be ready for you to apply tape.

Note: If your disclosure (and/or model) will not fit in this envelope, another alternative is to cut the template on the dotted lines and use the resulting label as a mailing label on a larger envelope or package

IMPORTANT

- You should make sure to NUMBER the PAGES (If more than one) of any disclosure you send to me.
- You should also be sure to make an EXACT DUPLICATE COPY for yourself with the page numbers on it. This way if I have any questions, and choose to contact you, it will be easy for us both to know that we are literally on the same page.

I look forward to your information and helping you with your inventive endeavor(s).

Thank you,



Richard L. Miller, P.E.

After Folding Tape This Edge

FOLD #1

FOLD #2

PLACE
STAMP
HERE
POSTAL SERVICE
WILL NOT
DELIVER
UNLESS STAMPED

FOLD #4

NOTICE TO ALL POSTMASTERS:
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deliver this envelope to the below
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12 PARKSIDE DR.
DIX HILLS, NY 11746-4879**

FOLD #1

FOLD #3

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