COMPLAINT REGARDING INVENTION PROMOTER

Instructions: Read the reverse side of this form before completing and submitting the form. Complete as much of the form as possible and return it to the U.S. Patent and Trademark Office at the address given on the reverse side. Please type or write clearly.

Invention Promoter's Name: PATENT TRADEMARK MARKETING

Invention Promoter's Address: 12701 WEST AVENUE SUITE 1327

City: SAN ANTONIO

State: TX

Zip Code: 78216

Complainant's Name: ANTHONY OVERMAN

Complainant's Address:

City:

State:

Zip Code:

Customer's Name: ANTHONY OVERMAN

WHAT IS YOUR COMPLAINT?

Please be as specific as possible. Specify the invention promotion services offered to be performed or performed, provide the name of the mass media in which the invention promoter advertised as providing such services, and explain the relationship between the customer and the invention promoter. If additional space is needed, the information may be provided on paper attached to this form.

SEE ATTACHED.

Signed: [Redacted]

Date: 7/2/2002

Burdens Hour Statement: This collection of information is provided for by 35 U.S.C. § 297(d). The information regarding invention promoters will be released to the public. This form is estimated to take 15 minutes to complete. The time will vary depending upon the needs of the individual case. Any comments on the amount of time are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.