

PETITION FOR EXTENSION OF TIME FOR FILING APPEAL BRIEF		Docket Number (Optional)								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">In re Application of</td> </tr> <tr> <td style="padding: 5px;">Application Number</td> <td style="padding: 5px;">Filed</td> </tr> <tr> <td colspan="2" style="padding: 5px;">For</td> </tr> <tr> <td style="padding: 5px;">Group Art Unit</td> <td style="padding: 5px;">Examiner</td> </tr> </table>			In re Application of		Application Number	Filed	For		Group Art Unit	Examiner
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing the appeal brief in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> One month (37 CFR 1.17(a)) <input type="checkbox"/> Two months (37 CFR 1.17(b)) <input type="checkbox"/> Three months (37 CFR 1.17(c)) <input type="checkbox"/> Four months (37 CFR 1.17(d)) </div> <div> \$ _____ \$ _____ \$ _____ \$ _____ </div> </div> <input type="checkbox"/> Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.										
<p>A verified statement of small entity status as a small entity under 37 CFR 1.27:</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> is enclosed. </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> has already been filed in this application. </div> <input type="checkbox"/> A check in the amount of the fee is enclosed.										
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.										
<input type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number _____. I have enclosed a duplicate copy of this sheet.										
<p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____.</p>										
_____ Date		_____ Signature _____ Typed or printed name								