







UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231 www.uspto.gov

### NOTICE OF ALLOWANCE AND FEE(S) DUE

7590

03/28/2002

SPENCER AND FRANK SUITE 300 EAST 1100 NEW YORK AVENUE NW WASHINGTON, DC 200053955 EXAMINER
HEWITT II, CALVIN L

ART UNIT CLASS-SUBCLASS

2161 705-059000

DATE MAILED: 03/28/2002

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/164,777      | 10/01/1998  | MIKI MULLOR          | REINC4237.01        | 7068             |

TITLE OF INVENTION: METHOD OF RESTRICTING SOFTWARE OPERATION WITHIN A LICENSE LIMITATION

| TOTAL CLAIMS | APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|--------------|----------------|--------------|-----------|-----------------|------------------|------------|
| 19           | nonprovisional | YES          | \$640     | \$0             | \$640            | 06/28/2002 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. <u>PROSECUTION ON THE MERITS IS CLOSED</u>, THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN <u>THREE MONTHS</u> FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. <u>THIS STATUTORY PERIOD CANNOT BE EXTENDED</u>. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above. If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is changed, pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above and notify the United States Patent and Trademark Office of the change in status, or

B. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check the box below and enclose the PUBLICATION FEE and 1/2 the ISSUE FEE shown above.

Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

II. PART B - FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Box ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

Page 1 of 3

PTOL-85 (REV. 07-01) Approved for use through 01/31/2004.









Complète and mail this form, together with applicable fee(s), to:

03/28/2002

**Box ISSUE FEE Assistant Commissioner for Patents** Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

SPENCER AND FRANK **SUITE 300 EAST** 1100 NEW YORK AVENUE NW WASHINGTON, DC 200053955

7590

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

| (Depositor's name) |      |  |
|--------------------|------|--|
| (Signature)        | <br> |  |
| (Date)             | <br> |  |
|                    | <br> |  |

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| 09/164,777      | 10/01/1998  | MIKI MULLOR          | REINC4237.01        | 7068             |

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| TOTAL CLAIMS                                                                                                                                                                                                                                                                                                                                    | APPLN. TYPE    | SMALL ENTITY | ISSUE FEE                                                                            | PUBLICATION FEE                                                                                                                                                                           | TOTAL FEE(S) DUE      | DATE DUE   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------|
| 19                                                                                                                                                                                                                                                                                                                                              | nonprovisional | YES          | \$640                                                                                | \$0                                                                                                                                                                                       | \$640                 | 06/28/2002 |
| EXA                                                                                                                                                                                                                                                                                                                                             | MINER          | ART UNIT     | CLASS-SUBCLAS                                                                        | ss                                                                                                                                                                                        |                       |            |
| HEWITT                                                                                                                                                                                                                                                                                                                                          | II, CALVIN L   | 2161         | 705-059000                                                                           |                                                                                                                                                                                           |                       |            |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. |                |              | the names of up to<br>or agents OR, alt<br>single firm (having<br>attorney or agent) | the patent front page, li<br>o 3 registered patent atto-<br>ernatively, (2) the name<br>ag as a member a regi-<br>on and the names of up<br>ttorneys or agents. If no<br>will be printed. | orneys 1stered to 2 2 |            |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

| Please check the appropriate assignee categor                                                                                                                                                                                                                       | y or categories (will not be printed on the patent)                                                                                                                                                                           | individual                                         | a corporation or other private group entit                                         | y 🚨 government        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|------------------------------------------------------------------------------------|-----------------------|--|
| 4a. The following fee(s) are enclosed:                                                                                                                                                                                                                              |                                                                                                                                                                                                                               |                                                    |                                                                                    |                       |  |
| ☐ Issue Fee                                                                                                                                                                                                                                                         | ☐ A check in the amount                                                                                                                                                                                                       | ☐ A check in the amount of the fee(s) is enclosed. |                                                                                    |                       |  |
| □ Publication Fee                                                                                                                                                                                                                                                   | Payment by credit card                                                                                                                                                                                                        | . Form PTO-2038                                    | 3 is attached.                                                                     |                       |  |
| ☐ Advance Order - # of Copies                                                                                                                                                                                                                                       | ☐ The Commissioner is because Account Number                                                                                                                                                                                  | ereby authorized                                   | by charge the required fee(s), or credit any (enclose an extra copy of this form). | overpayment, to       |  |
| The COMMISSIONER OF PATENTS AND application identified above.                                                                                                                                                                                                       | TRADEMARKS is requested to apply the Issue Fee                                                                                                                                                                                | and Publication                                    | Fee (if any) or to re-apply any previously p                                       | oaid issue fee to the |  |
| (Authorized Signature)                                                                                                                                                                                                                                              | (Date)                                                                                                                                                                                                                        |                                                    |                                                                                    |                       |  |
| other than the applicant; a registered atto interest as shown by the records of the Unit Burden Hour Statement: This form is estim depending on the needs of the individual ca to complete this form should be sent to the and Trademark Office. Washington, D.C. 2 | ated to take 0.2 hours to complete. Time will vary se. Any comments on the amount of time required e Chief Information Officer, United States Patent 0231. DO NOT SEND FEES OR COMPLETED EES AND THIS FORM TO: Box Issue Fee, |                                                    |                                                                                    |                       |  |
| Under the Paperwork Reduction Act of collection of information unless it displays                                                                                                                                                                                   | 1995, no persons are required to respond to a a valid OMB control number.                                                                                                                                                     |                                                    |                                                                                    |                       |  |

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (REV. 07-01) Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE







## UNITED STATES PATENT AND TRADEMARK OFFICE



UNITED STATES DEPARTMENT OF COMMERCE United States Patont and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231 www.uspto.gov

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| 09/164,777                          | 10/01/1998     | MIKI MULLOR REINC4237.01 |                     | 7068             |
| 7:                                  | 590 03/28/2002 |                          | EXAMIN              | ER               |
| SPENCER AND FRANK<br>SUITE 300 EAST |                |                          | HEWITT II, C        | ALVIN L          |
| 1100 NEW YORK                       |                |                          | ART UNIT            | PAPER NUMBER     |
| WASHINGTON, DC 200053955            |                | 2161                     |                     |                  |

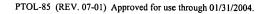
## Determination of Patent Term Extension under 35 U.S.C. 154 (b) (application filed after June 7, 1995 but prior to May 29, 2000)

The patent term extension is 0 days. Any patent to issue from the above identified application will include an indication of the 0 day extension on the front page.

If a continued prosecution application (CPA) was filed in the above-identified application, the filing date that determines patent term extension is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) system. (http://pair.uspto.gov)







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| Nation of Allawahility                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 09/164,777                                                                                                 | MULLOR ET AL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                              |
| Notice of Allowability                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Examiner                                                                                                   | Art Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                              |
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| The MAILING DATE of this communication appear All claims being allowable, PROSECUTION ON THE MERITS IS herewith (or previously mailed), a Notice of Allowance (PTOL-85) NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RIOF the Office or upon petition by the applicant. See 37 CFR 1.313                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | (OR REMAINS) CLOSED in this apport or other appropriate communication GHTS. This application is subject to | olication. If not include will be mailed in due of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ed<br>course. <b>THIS</b>    |
| <ol> <li>This communication is responsive to <u>2-5-02</u>.</li> <li>The allowed claim(s) is/are <u>1-10,13 and 16-23</u>.</li> <li>The drawings filed on are accepted by the Examine</li> <li>Acknowledgment is made of a claim for foreign priority und a) All b) Some* c) None of the:</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |
| <ol> <li>Certified copies of the priority documents have</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | been received.                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |
| <ol><li>Certified copies of the priority documents have</li></ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | e been received in Application No                                                                          | <del></del> •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                              |
| <ol> <li>Copies of the certified copies of the priority doe         International Bureau (PCT Rule 17.2(a)).     </li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | cuments have been received in this                                                                         | national stage applicat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ion from the                 |
| * Certified copies not received:  5. Acknowledgment is made of a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the foreign language provisional at a claim for domestic priority under the claim for domestic priority under the foreign language provision | pplication has been received.                                                                              | onal application).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |
| Applicant has THREE MONTHS FROM THE "MAILING DATE" of below. Failure to timely comply will result in ABANDONMENT of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | this communication to file a reply co                                                                      | omplying with the requi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | rements noted EXTENDABLE.    |
| 7. A SUBSTITUTE OATH OR DECLARATION must be submINFORMAL PATENT APPLICATION (PTO-152) which gives reas                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | OTICE OF                     |
| 8. CORRECTED DRAWINGS must be submitted.  (a) including changes required by the Notice of Draftspers.  1) hereto or 2) to Paper No.  (b) including changes required by the proposed drawing of including changes required by the attached Examiner.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | correction filed, which has be                                                                             | een approved by the E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                              |
| Identifying indicia such as the application number (see 37 CFR 1 of each sheet. The drawings should be filed as a separate paper                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |
| 9.   DEPOSIT OF and/or INFORMATION about the deposit attached Examiner's comment regarding REQUIREMENT FOR T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | sit of BIOLOGICAL MATERIAL n<br>HE DEPOSIT OF BIOLOGICAL MA                                                | nust be submitted. N<br>TERIAL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | lote the                     |
| Attachment(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |
| <ul> <li>1⊠ Notice of References Cited (PTO-892)</li> <li>3□ Notice of Draftperson's Patent Drawing Review (PTO-948)</li> <li>5⊠ Information Disclosure Statements (PTO-1449), Paper No. 1□ Examiner's Comment Regarding Requirement for Deposit of Biological Material</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 4⊠ Interview Summa<br>1. 6⊠ Examiner's Ame                                                                 | al Patent Application (Fary (PTO-413), Paper Indiment/Comment Indiana (PTO-413), Paper Indiana (PTO-4133), Pa | No. <u>14</u> .<br>Allowance |

U.S. Patent and Trademark Office PTO-37 (Rev. 04-01)

**Notice of Allowability** 

Part of Paper No. 14 .





# M/ D me age 2 220

Application/Control Number: 09/164,777

Art Unit: 2161

## Status of Claims

1. Claims 1-10, 13, and 16-23 have been examined.

### Examiner's Amendment

2. An examiner's amendment to the record appears below. Should the changes and/or additions be unacceptable to applicant, an amendment may be filed as provided by 37 CFR 1.312. To ensure consideration of such an amendment, it MUST be submitted no later than the payment of the issue fee.

Authorization for this examiner's amendment was given in a telephone interview with Jeffri Kaminski on 19 February 2002.

3. \ The application has been amended as follows:

In claim 1, line 2, replace "(BIOS)" with BIOS.

In claim 1, line 3, replace "... computer, \_ and" with "... computer, and"

In claim 20 using an agent to perform the following steps has been

inserted in line 6, as the second limitation after "loading the application..." and before "extracting license information...", detailing that the steps of







# DOCKET

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Advanced out-of-the-box PTAB and TTAB analytics are always at your fingertips.

## API

Docket Alarm offers a powerful API (application programming interface) to developers that want to integrate case filings into their apps.

#### **LAW FIRMS**

Build custom dashboards for your attorneys and clients with live data direct from the court.

Automate many repetitive legal tasks like conflict checks, document management, and marketing.

#### **FINANCIAL INSTITUTIONS**

Litigation and bankruptcy checks for companies and debtors.

## **E-DISCOVERY AND LEGAL VENDORS**

Sync your system to PACER to automate legal marketing.

