

072709  
 16176  
 U.S. PTO

**U.S. PTO**  
**12/460941**  
**07/27/2009**  
 PTO/SB/05 (08-08)  
 Approved for use through 06/30/2010. OMB 0651-0032  
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**UTILITY**  
**PATENT APPLICATION**  
**TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	ASD10554P0070US
First Inventor	Gerald Horn
Title	Preferential Vasoconstriction...
Express Mail Label No.	EV 955717223 US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
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1.  Fee Transmittal Form (e.g., PTO/SB/17)
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 49 ]  
Both the claims and abstract must start on a new page  
(For information on the preferred arrangement, see MPEP 608.01(a))
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 7 ]
5. Oath or Declaration [Total Sheets 2 ]
  - a.  Newly executed (original or copy)
  - b.  A copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
name in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6.  Application Data Sheet. See 37 CFR 1.76
7.  CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)  
 Landscape Table on CD
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, items a. - c. are required)
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  Paper
  - c.  Statements verifying identity of above copies

- ACCOMPANYING APPLICATION PARTS**
9.  Assignment Papers (cover sheet & document(s))  
Name of Assignee Alpha Synergy Development, Inc.
  10.  37 CFR 3.73(b) Statement (when there is an assignee)  Power of Attorney
  11.  English Translation Document (if applicable)
  12.  Information Disclosure Statement (PTO/SB/08 or PTO-1449)  
 Copies of citations attached
  13.  Preliminary Amendment
  14.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
  15.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
  16.  Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i).  
Applicant must attach form PTO/SB/35 or equivalent.
  17.  Other: Petition to Accept Color Drawings or  
Photographs

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation   
  Divisional   
  Continuation-in-part (CIP)   
 of prior application No.: .....

Prior application information:                      Examiner: \_\_\_\_\_                      Art Unit: \_\_\_\_\_

**19. CORRESPONDENCE ADDRESS**

The address associated with Customer Number: 32116   
 OR   
 Correspondence address below

Name	Wood Phillips Katz Clark & Mortimer				
Address	500 West Madison Street				
City	Chicago	State	Illinois	Zip Code	60661
Country	US	Telephone	(312) 876-1800	Email	docketing@woodphillips.com

Signature		Date	July 27, 2009
Name (Print/Type)	Mark Polyakov	Registration No. (Attorney/Agent)	54,377

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		Application Number	
		Filing Date	
		First Named Inventor	Gerald Horn
		Examiner Name	
		Art Unit	
		Attorney Docket No.	ASD10554P00070US
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	765	

**METHOD OF PAYMENT (check all that apply)**

Check  
  Credit Card  
  Money Order  
  None  
  Other (please identify): \_\_\_\_\_

Deposit Account  
 Deposit Account Number: 23-0785  
 Deposit Account Name: Wood/Phillips

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  
  Charge fee(s) indicated below, **except for the filing fee**

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  
  Credit any overpayments

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**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	545
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

**Total Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**    **Multiple Dependent Claims**  
12 - 20 or HP = 0 x \_\_\_\_\_ = \_\_\_\_\_    **Fee (\$)**    **Fee Paid (\$)**  
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**Indep. Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**  
5 - 3 or HP = 2 x 110 = 220    \_\_\_\_\_    \_\_\_\_\_  
 HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

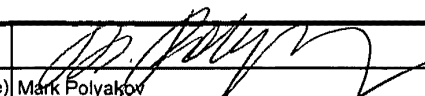
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

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<u>49</u> - 100 =	<u>0</u>	/ 50 = _____ (round up to a whole number) x _____ =		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount) \_\_\_\_\_

Other (e.g., late filing surcharge): \_\_\_\_\_

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent) 54,377	Telephone (312) 876-2110
Name (Print/Type)	Mark Polyakov		Date July 27, 2009

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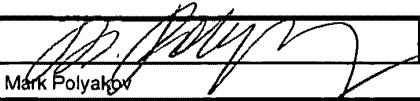
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Name (Print/Type)	Mark Polyakov	Telephone	(312) 876-2110
		Date	July 27, 2009

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**APPLICATION DATA SHEET**  
(Inventor(s) With Representation)

**Inventor Information**

Inventor One, Given Name: Gerald  
Family Name: HORN  
Postal Address Line One: 1150 Heather Road  
Postal Address Line Two:  
City: Deerfield  
State or Province: Illinois  
Postal or Zip Code: 60015  
Citizenship Country: United States

**Correspondence Information**

Correspondence Customer Number: 32116  
Name Line One: Wood, Phillips, Katz, Clark & Mortimer  
Address Line One: Citigroup Center, Suite 3800  
Address Line Two: 500 West Madison Street  
City: Chicago  
State or Province: Illinois  
Postal Or Zip Code: 60661  
Telephone: 312-876-1800  
Facsimile: 312-876-2020

**Application Information**

This Application is a: Utility  
Title Line One: Preferential Vasoconstriction Compositions  
Title Line Two: and Methods of Use  
Total Drawing Sheets: 7  
Docket Number: ASD10554P00070US

Claiming Priority of: US Provisional Application No. 61/137,714  
filed August 1, 2008;  
US Provisional Application No. 61/192,777  
filed September 22, 2008;  
US Provisional Application No.61/203,120  
filed December 18, 2008; and  
US Provisional Application No. 61/207,481  
filed February 12, 2009

**Representative Information**

Registration Number One: 54,377

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