



## CERTIFICATION

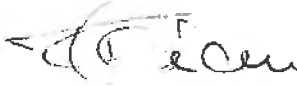
It is hereby certified that the attached are true copies of the following documents contained in the file of international application No. PCT/US2011/064191, filed with the United States Patent and Trademark Office as receiving Office on 9 December 2011.

- record copy of the international application;
- statement concerning a sequence listing;
- fee calculation sheet (Form PCT/RO/101 (annex));
- notification of the international application number and of the international filing date (Form PCT/RO/105);
- notification concerning payment of prescribed fees (Form PCT/RO/102);
- notification of receipt of search copy (Form PCT/ISA/202);
- priority documents (2);
- notification of receipt of record copy (Form PCT/IB/301);
- notification concerning submission or transmittal of priority document (Form IB/304);
- notification of Transmittal of the International Search Report and the Written Opinion of the International Searching Authority, or the Declaration (Form PCT/ISA/220);
- international search report (Form PCT/ISA/210);
- written opinion of the ISA (Form PCT/ISA/237);
- international publication of the application;
- notification concerning transmittal of copy of international application as published or republished (Form PCT/IB/311);
- amendment of the claims with letter and statement;
- notification concerning the filing of amendments (Form PCT/IB/346);
- communication in cases where no other Form is applicable (Form PCT/IB/345);
- first notice informing the applicant of the communication of the international application (to the designated Offices which do not apply the 30 month time limit under Article 22(1))(Form PCT/IB/308 (First notice));
- re-publication of the international application;
- correction of the amendments to the claims;
- second notice informing the applicant of the communication of the international application (to the designated Offices which apply the 30 month time limit under Article 22(1))(Form PCT/IB/308 (Second and supplementary notice));
- notification concerning transmittal of copy of international application as published or republished (Form PCT/IB/311);
- request for recording of changes in the request;
- replacement sheets of the request form;
- transmittal letter and powers of attorney;
- notification of recording of a change (Form PCT/IB/306);

34, chemin des Colombettes  
1211 Geneva 20, Switzerland  
T +41 22 733 6111 F +41 22 733 6110

- international preliminary report on patentability (Chapter I of the PCT) (Form PCT/IB/373); and
- notification concerning transmittal of copy of international preliminary report on patentability (Chapter I of the PCT) (Form (PCT/IB/326).

By: The International Bureau



Fabienne Gateau  
PCT Officer  
PCT Legal and User Support Section  
PCT Legal and User Relations Division

March 15, 2022

**PCT  
REQUEST**

The undersigned requests that the present international application be processed according to the Patent Corporation Treaty

<b>PCT/US11/64191</b> International Application No.
<b>09 DEC 2011 (09.12.11)</b> International Filing Date
<b>RO/US</b> Name of receiving Office and "PCT International Application"
Applicant's or agent's file reference (if desired) (12 characters maximum) <b>46483-6001-00-WO.601218</b>

<b>Box No. I TITLE OF INVENTION</b>								
<b>USE OF CHIMERIC ANTIGEN RECEPTOR-MODIFIED T CELLS TO TREAT CANCER</b>								
<b>Box No. II APPLICANT</b> <span style="float:right">This person is also inventor</span>								
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) <b>THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA Center for Technology Transfer 3160 Chestnut Street, Suite 200 Philadelphia, PA 19104-6283 United States of America</b>	Telephone No.							
	Facsimile No.							
	Teleprinter No.							
	Applicant's registration No. with the Office							
State (that is, country) of nationality: <b>US</b>	State (that is, country) of residence: <b>US</b>							
This person is applicant for the purposes of: <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">all designated States</td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> <td style="text-align:center;">all designated States except the United States of America</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;">the United States of America only</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;">the States indicated in the Supplemental Box</td> </tr> </table>		all designated States	<input checked="" type="checkbox"/>	all designated States except the United States of America	<input type="checkbox"/>	the United States of America only	<input type="checkbox"/>	the States indicated in the Supplemental Box
all designated States	<input checked="" type="checkbox"/>	all designated States except the United States of America	<input type="checkbox"/>	the United States of America only	<input type="checkbox"/>	the States indicated in the Supplemental Box		
<b>Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>								
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) <b>JUNE, Carl H. 409 Baird Road Merion Station, PA 19066 United States of America</b>	This person is:							
	<input type="checkbox"/> applicant only							
	<input checked="" type="checkbox"/> applicant and inventor							
	<input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)							
Applicant's registration No. with the Office								
State (that is, country) of nationality: <b>US</b>	State (that is, country) of residence: <b>US</b>							
This person is applicant for the purposes of: <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">all designated States</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;">all designated States except the United States of America</td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> <td style="text-align:center;">the United States of America only</td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;">the States indicated in the Supplemental Box</td> </tr> </table>		all designated States	<input type="checkbox"/>	all designated States except the United States of America	<input checked="" type="checkbox"/>	the United States of America only	<input type="checkbox"/>	the States indicated in the Supplemental Box
all designated States	<input type="checkbox"/>	all designated States except the United States of America	<input checked="" type="checkbox"/>	the United States of America only	<input type="checkbox"/>	the States indicated in the Supplemental Box		
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.								
<b>Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE</b>								
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:								
<input checked="" type="checkbox"/> agent <span style="margin-left: 100px;"><input type="checkbox"/> common representative</span>								
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country) <b>NGUYEN, Quang D. Riverside Law, LLP 300 Four Falls Corporate Center, Suite 710 300 Conshohocken State Road West Conshohocken, PA 19428 United States of America</b>	Telephone No. <b>215.268.3888</b>							
	Facsimile No. <b>215.268.3871</b>							
	Teleprinter No.							
	Agent's registration No. with the Office <b>52,066</b>							
Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.								

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)				
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>				
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> LEVINE, Bruce L. 1258 Liberty Bell Drive Cherry Hill, NJ 08003 United States of America				applicant only
	<input checked="" type="checkbox"/>			applicant and inventor
				inventor only <i>(If this check-box is marked, do not fill in below.)</i>
				Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: US		State <i>(that is, country)</i> of residence: US		
This person is applicant for the purposes of:	all designated States	all designated States except the United States of America	<input checked="" type="checkbox"/> the United States of America only	the States indicated in the Supplemental Box
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> PORTER, David L. 821 Crum Creek Road Springfield, Pa. 19064 United States of America				applicant only
	<input checked="" type="checkbox"/>			applicant and inventor
				inventor only <i>(If this check-box is marked, do not fill in below.)</i>
				Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: US		State <i>(that is, country)</i> of residence: US		
This person is applicant for the purposes of:	all designated States	all designated States except the United States of America	<input checked="" type="checkbox"/> the United States of America only	the States indicated in the Supplemental Box
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> KALOS, Michael D. 716 Carpenter Lane Philadelphia, PA 19119 United States of America				applicant only
	<input checked="" type="checkbox"/>			applicant and inventor
				inventor only <i>(If this check-box is marked, do not fill in below.)</i>
				Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: US		State <i>(that is, country)</i> of residence: US		
This person is applicant for the purposes of:	all designated States	all designated States except the United States of America	<input checked="" type="checkbox"/> the United States of America only	the States indicated in the Supplemental Box
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i>				applicant only
				applicant and inventor
				inventor only <i>(If this check-box is marked, do not fill in below.)</i>
				Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality:		State <i>(that is, country)</i> of residence:		
This person is applicant for the purposes of:	all designated States	all designated States except the United States of America	the United States of America only	the States indicated in the Supplemental Box
Further applicants and/or (further) inventors are indicated on another continuation sheet.				

**Supplemental Box** *If the Supplemental Box is not used, this sheet should not be included in the request.*

1. *If, in any of the Boxes, except Boxes Nos. VIII(f) to (g) for which a special continuation box is provided, the space is insufficient to furnish all the information: in such case, write "Continuation of Box No. ...." (indicate the number of the Box) and furnish the information in the same manner as required according to the captions of the Box in which the space was insufficient, in particular:*
  - (i) *if more than one person is to be indicated as applicant and/or inventor and no "continuation sheet" is available: in such case, write "Continuation of Box No. III" and indicate for each additional person the same type of information as required in Box No. III. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below;*
  - (ii) *if, in Box No. II or in any of the sub-boxes of Box No. III, the indication "the States indicated in the Supplemental Box" is checked: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the applicant(s) involved and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is applicant;*
  - (iii) *if, in Box No. II or in any of the sub-boxes of Box No. III, the inventor or the inventor/applicant is not inventor for the purposes of all designated States or for the purposes of the United States of America: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is inventor;*
  - (iv) *if, in addition to the agent(s) indicated in Box No. IV, there are further agents: in such case, write "Continuation of Box No. IV" and indicate for each further agent the same type of information as required in Box No. IV;*
  - (v) *if, in Box No. VI, there are more than three earlier applications whose priority is claimed: in such case, write "Continuation of Box No. VI" and indicate for each additional earlier application the same type of information as required in Box No. VI.*
2. *If the applicant intends to make an indication of the wish that the international application be treated, in certain designated States, as an application for a patent of addition, certificate of addition, inventor's certificate of addition or utility certificate of addition: in such case, write the name or two-letter code of each designated State concerned and the indication "patent of addition," "certificate of addition," "inventor's certificate of addition" or "utility certificate of addition," the number of the parent application or parent patent or other parent grant and the date of grant of the parent patent or other parent grant or the date of filing of the parent application (Rules 4.11(a)(1) and 49bis.1(a) or (b)).*
3. *If the applicant intends to make an indication of the wish that the international application be treated, in the United States of America, as a continuation or continuation-in-part of an earlier application: in such case, write "United States of America" or "US" and the indication "continuation" or "continuation-in-part" and the number and the filing date of the parent application (Rules 4.11(e)(i) and 49bis.1(c)).*
4. *If the applicant wishes to request the receiving Office or the International Bureau to obtain a priority document from a digital library but that document is only held in a digital library in connection with another application which also relied upon that priority document to support a priority claim (and unless that digital library is to be accessed through the Digital Access Service for Priority Documents), in such cases write "Continuation of Box No. VI", indicate for each earlier application concerned the same type of information as required in Box No. VI and indicate the number under which the application is stored (and, if known, the digital library concerned) (Section 716(a)(ii)).*

Continuation of Box No. IV  
 ALLEN, Justin  
 DOYLE, Kathryn  
 HAAS, Dennis  
 LI, Yuqi  
 NGUYEN, Quang  
 SILVA, Domingos  
 Riverside Law, LLP  
 300 Four Falls Corporate Center, Suite 710  
 300 Conshohocken State Road  
 West Conshohocken, PA 19428  
 US  
 Tel: (215)268-3888  
 Fax: (215)268-3871  
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