From:	Favor, Jamel
To:	PTAB Hearings; BFLANIGEN@sternekessler.com
Cc:	<u>Swift, Erica; Cunningham, Larena; Gerukos, Sylvia; Favor, Jamel; Easton, Gregory;</u> <u>OPARTINGTON@sternekessler.com; Emily.Whelan@wilmerhale.com; Deric.Geng@wilmerhale.com; Bobo, Pat</u>
Subject:	RE: IPR2023-00480 and -00481 // Petitioner"s LEAP Practitioner Request for Oral Hearing Participation and Verification Form
Date:	Thursday, June 6, 2024 8:12:04 AM
Attachments:	image001.png image002.png IPR2023-00481 Olga Partington LEAP Request.pdf IPR2023-00480 Olga Partington LEAP Request.pdf

Greetings,

Petitioner's request that Olga A. Partington be permitted to participate in the oral hearing as a LEAP practitioner is granted. Petitioner is granted an additional fifteen minutes of argument time during the oral hearing, and reminded that the LEAP practitioner is required to have a meaningful and substantive opportunity to argue. For guidance regarding LEAP, please visit the USPTO website: www.uspto.gov/leap.

Sincerely,

PTAB Hearings

From: Bill Flanigen <<u>BFLANIGEN@sternekessler.com</u>>

Sent: Wednesday, June 5, 2024 1:28 PM

To: PTAB Hearings < <u>PTABHearings@USPTO.GOV</u>>

Cc: Eldora L. Ellison < <u>EELLISON@sternekessler.com</u>>; Olga A. Partington

<<u>OPARTINGTON@sternekessler.com</u>>; JC Rozendaal <<u>JCROZENDAAL@sternekessler.com</u>>; Christina Dashe <<u>CDashe@sternekessler.com</u>>; Prati Khanduri <<u>PKHANDURI@sternekessler.com</u>>; Tyler Liu <<u>TLIU@sternekessler.com</u>>; Madeleine Bond <<u>MBond@sternekessler.com</u>>; PTAB Account <<u>PTAB@sternekessler.com</u>>; 'Emily.Whelan@wilmerhale.com'; 'Deric.Geng@wilmerhale.com';

'Cindy.Kan@wilmerhale.com'; 'david.bassett@wilmerhale.com'; 'vinita.ferrera@wilmerhale.com'; 'david.mlaver@wilmerhale.com'; 'mary.pheng@wilmerhale.com';

'asher.mcguffin@wilmerhale.com'; 'scott.bertulli@wilmerhale.com';

'WHMerckMavencladIPRs@wilmerhale.com'

Subject: IPR2023-00480 and -00481 // Petitioner's LEAP Practitioner Request for Oral Hearing Participation and Verification Form

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RE: Petitioner's LEAP Practitioner Request for Oral Hearing Participation and Verification Form

IPR2023-00480 // U.S. Patent No. 7,713,947

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IPR2023-00481 // U.S. Patent No. 8,377,903

Your Honors,

Petitioner is writing to submit a LEAP participation request for the Oral Hearing scheduled on Tuesday, June 25, 2024, in *inter partes* review nos. IPR2023-00480 of U.S. Patent No. 7,713,947 and IPR2023-00481 of U.S. Patent No. 8,377,903.

Olga A. Partington (Reg. No. 65,326) qualifies under the LEAP eligibility requirements. Petitioner intends to have Dr. Partington argue a portion of the hearing. Petitioner has attached the required LEAP Request for Oral Hearing Participation and Practitioner Verification Forms certifying her eligibility. Petitioner also requests an additional 15 minutes of time to accommodate these arguments.

Should any additional information be required, please let us know.

Best regards,

Bill Flanigen (on behalf of Eldora L. Ellison and Olga A. Partington)



Bill Flanigen(he/him)Manager, PTO Litigation TeamSterne, Kessler, Goldstein & Fox P.L.L.C.1101 K Street, NW, 10th Floor, Washington, DC 20005Email: bflanigen@sternekessler.comDirect: 202.772.8693Main: 202.371.2600

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LEAP PRACTITIONER VERIFICATION FORM AND REQUEST FOR ORAL HEARING PARTICIPATION

On behalf of

requests to participate in the oral hearing in on its scheduled date, as noted below.

Pursuant to 28 U.S.C. § 1746, I, , certify that I am eligible to participate in the Legal Experience and Advancement Program (LEAP) program. I have three or fewer substantive oral hearing arguments before federal tribunals, including PTAB.

I certify/verify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Hearing Information			
Requesting Party:			
Appeal/Case/Control Number:			
Hearing Date (mm/dd/yyyy):			
LEAP Practitioner Contact Informa	tion		
LEAP Practitioner Name:			
Firm Name:			
Street Address 1:			
Street Address 2:			
City:			
State/Province:	Zip/Postal Code:		
Country:	Phone Number:		
Email:			

Date:

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(Signature)

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