

EXAMPLE EXAMPLE EXAMPLE EXAMPLE EXAMPLE EXAMPLE

The information contained in this document is for educational purposes and does not constitute legal or financial advice that is suitable for your situation. To obtain legal or financial advice, you should consult your lawyer or accountant.

[Company Logo] - **Invention Disclosure**

For Patent Department Use Only	
Attorney	Docket Number
Origin	Classification

Short Descriptive Title of Invention					
Inventor's Full Name, Including Middle Name		Inventor's Full Name, Including Middle Name		Inventor's Full Name, Including Middle Name	
Job Title		Job Title		Job Title	
Office Phone	Div., Staff or Subsidiary	Office Phone	Div., Staff or Subsidiary	Office Phone	Div., Staff or Subsidiary
Social Security No.	Citizenship	Social Security No.	Citizenship	Social Security No.	Citizenship
Internal Mailing Address		Internal Mailing Address		Internal Mailing Address	
Home Post Office Address		Home Post Office Address		Home Post Office Address	
Organization Code	Location Code	Organization Code	Location Code	Organization Code	Location Code
Department Name and No.		Department Name and No.		Department Name and No.	

Supervisor's Name and Phone No.	Supervisor's Name and Phone No.	Supervisor's Name and Phone No.
Manager's Name and Phone No.	Manager's Name and Phone No.	Manager's Name and Phone No.

COMPLETE THE FOLLOWING AND THE SECOND PAGE

What do you consider to be the new features of the invention?

Identify the purpose/function fo the new feature(s) of the invention and advantages over prior technology.

Identify the closest technology, if any, of which you are aware. Provide copies, if available.

Identify first dated record(s) of invention.	Date a working model, device or process was or will be completed.
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If the invention will be released for production, identify model and year.	If any contract funds were used in the conception or first building of this invention, identify the contract.
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If disclosed to non-Company personnel, identify recipient and date.

Short Descriptive Title of Invention

DESCRIPTION OF THE INVENTION - (Use ink)

Provide a brief description of the invention and attach prints, reports, photos, etc., as available for full and complete understanding of the invention, including its operation and environment. All attachments must be signed by the inventor(s), dated and witnessed.

(USE ADDITIONAL SHEETS AS REQUIRED)

LIST ALL ATTACHMENTS

READ AND UNDERSTOOD:

Signature of Inventor

Signature of Witness

Signature of Inventor

Signature of Witness

Signature of Inventor