

Doc Code: ECOMM.AUTH/ECOMM.WTDW

Doc Description: Internet Communications Authorization/Internet Communications Authorization Withdrawal

PTO/SB/439 (11-15)

**AUTHORIZATION FOR INTERNET  
COMMUNICATIONS IN A PATENT  
APPLICATION OR REQUEST TO  
WITHDRAW AUTHORIZATION FOR  
INTERNET COMMUNICATIONS**

Application No.	
Filing Date	
First Named Inventor	
Art Unit	
Examiner Name	
Practitioner Docket No.	

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**I. To authorize permission for Internet Communications.**

☐ Recognizing that Internet communications are not secure, I hereby authorize the USPTO to communicate with the undersigned and practitioners in accordance with 37 CFR 1.33 and 37 CFR 1.34 concerning any subject matter of this application via video conferencing, instant messaging, or electronic mail. I understand that a copy of these communications will be made of record in the application file. (MPEP 502.03)

**II. To withdraw authorization for Internet Communications.**

☐ The authorization given on \_\_\_\_\_, to the USPTO to communicate with the undersigned and any practitioner in accordance with 37 CFR 1.33 and 37 CFR 1.34 concerning any subject matter of this application via Internet communications such as video conferencing, instant messaging, or electronic mail is hereby withdrawn. I understand that the withdrawal is effective when approved rather than when received.

I am the

- ☐ applicant.
- ☐ attorney or agent of record. Registration number \_\_\_\_\_.
- ☐ attorney or agent acting under 37 CFR 1.34. Registration number \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
Telephone Number

**NOTE:** This form must be signed in accordance with 37 CFR 1.33. See 37 CFR 1.4 for signature requirements and certifications. Juristic entities must be represented by a patent practitioner (see 37 CFR 1.31, which is applicable to any paper filed on or after September 16, 2012, that is presented on behalf of a juristic entity, regardless of application filing date). Submit multiple forms if more than one signature is required, see below\*.

☐ \* Total of \_\_\_\_\_ forms are submitted.

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