

Project Number:

CONTACT INFORMATION

To be sure that we have up-to-date contact information, please complete or correct the following data.

CONTACT		Additions or changes?
Name		
Company		
Address		
City & State		
Zip code		
Phone: Home Business FAX		
INVENTOR		Additions or changes?
Name		
Company		
Address		
City & State		
Zip code		
Phone: Home Business FAX		

CONTACT'S ASSOCIATION WITH THIS PROJECT

We would like to know how you are related to this ERIP technology. Please check one or more boxes below. If your circumstance does not fit any of the listed categories, please describe it in the space provided.

- Inventor
- Applicant
- Licensee
- Owner of technology
- Designated contact

- Developer of technology
- Other (Describe below)