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PTO/SB/01 (Modified)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	ZNA-PT069
	First Named Inventor	Nilsen et al.
	<i>COMPLETE IF KNOWN</i>	
	Application Number	12/810,897
	Filing Date	Not Yet Known
	Group Art Unit	Not Yet Known
Examiner Name	Not Yet Known	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FORMATION OF A LITHIUM COMPRISING STRUCTURE ON A SUBSTRATE BY ALD

the specification of which (Title of the invention)

is attached hereto
OR
 was filed on (MM/DD/YYYY) 06/28/2010 as United States Application Number or PCT International Application Number 12/810,897 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
20076696	NO	12/28/2007	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/NO2008/000468	12/23/2008	

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input checked="" type="checkbox"/> Customer Number 3624		<input type="checkbox"/> Registered practitioner(s) name/registration number listed below	
		Place Customer Number Bar Code Label here	
Name	Registration Number	Name	Registration Number
Namaly, the Attorneys of Volpe and Koerig, P.C.			

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number **3624** OR Bar Code Label

Name	VOLPE AND KOENIG, P.C.		
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

Authorization To Permit Access To Application by Participating Offices

If checked, the undersigned hereby grants the USPTO authority to provide the European Patent Office (EPO), the Japan Patent Office (JPO), the Korean Intellectual Property Office (KIPO), the World Intellectual Property Office (WIPO), and any other intellectual property offices in which a foreign application claiming priority to the above-identified patent application is filed access to the above-identified patent application. See 37 CFR 1.14(c) and (h). This box should not be checked if the applicant does not wish the EPO, JPO, KIPO, WIPO, or other intellectual property office in which a foreign application claiming priority to the above-identified patent application is filed to have access to the above-identified patent application.

In accordance with 37 CFR 1.14(h)(3), access will be provided to a copy of the above-identified patent application with respect to: 1) the above-identified patent application-as-filed, 2) any foreign application to which the above-identified patent application claims priority under 35 USC 119(a)-(d) if a copy of the foreign application that satisfies the certified copy requirement of 37 CFR 1.55 has been filed in the above-identified patent application, and 3) any U.S. application-as-filed from which benefit is sought in the above-identified patent application.

In accordance with 37 CFR 1.14(c), access may be provided to information concerning the date of filing the Authorization to Permit Access to Application by Participating Offices.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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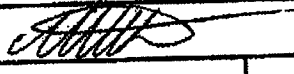
DECLARATION

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ola		Nilsen	
Inventor's Signature <i>Ola Nilsen</i>		Date <i>02.08.2010</i>	
Residence: City	Oslo	State	Country NO
Citizenship NO			
Mailing Address Høyenhallsvingen 21A			
Mailing Address			
City	Oslo	State	ZIP 0667
		Country NO	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Helmer		Fjellvåg	
Inventor's Signature <i>Helmer Fjellvåg</i>		Date <i>05.08.2010</i>	
Residence: City	Oslo	State	Country NO
Citizenship NO			
Mailing Address Siriusveien 15			
Mailing Address			
City	Oslo	State	ZIP 0492
		Country NO	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mari Endresen		Aines	
Inventor's Signature <i>Mari Endresen Aines</i>		Date <i>16.08.2010</i>	
Residence: City	Oslo	State	Country NO
Citizenship NO			
Mailing Address Trimveien 6, H0102			
Mailing Address			
City	Oslo	State	ZIP 0372
		Country NO	

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Titta		Aaltonen	
Inventor's Signature		Date	
Residence: City	Oslo	State	Country NO
Mailing Address		Citizenship NO	
Munkedamsvelen 81D			
Mailing Address			
City	Oslo	State	Country NO
		ZIP	0270
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Matti		Putkonen	
Inventor's Signature		Date	
		08/03/8010	
Residence: City	Espoo	State	Country FI
Mailing Address		Citizenship FI	
Luuvanpuisto 5			
Mailing Address			
City	Espoo	State	Country FI
		ZIP	02620
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	Country
		ZIP	

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	ZNA-PT069
	First Named Inventor	Nielsen et al.
	COMPLETE IF KNOWN	
	Application Number	12/810,897
	Filing Date	Not Yet Known
	Group Art Unit	Not Yet Known
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
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PCT/NO2008/000468	12/23/2008	

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Customer Number → Place Customer Number Bar Code Label here
 OR
 Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number OR

Name	VOLPE AND KOENIG, P.C.				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

Authorization To Permit Access To Application by Participating Offices

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ZNA-PT069

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DECLARATION

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ola		Nielsen	
Inventor's Signature <i>Ola Nielsen</i>		Date <i>17-11-2010</i>	
Residence: City	Oslo	State	Country NO
Mailing Address Høyenhallsvingen 21A			
Mailing Address			
City	Oslo	State	ZIP 0667
		Country	NO
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Helmer		Fjellvåg	
Inventor's Signature <i>Helmer Fjellvåg</i>		Date <i>16/11-10</i>	
Residence: City	Oslo	State	Country NO
Mailing Address Siriusveien 15			
Mailing Address			
City	Oslo	State	ZIP 0492
		Country	NO
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Mari Endresen		Alnes	
Inventor's Signature <i>Mari Endresen Alnes</i>		Date <i>16-11-10</i>	
Residence: City	Oslo	State	Country NO
Mailing Address St Jørgensvei 31			
Mailing Address			
City	Oslo	State	ZIP 0662
		Country	NO

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ZNA-PT069

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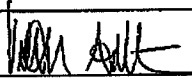

PTO/SB/02A (11-00)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
--------------------	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Titta		Aaltonen	
Inventor's Signature 		Date 12.11.2010	
Residence: City	Oslo	State	Country NO
Citizenship FI			
Mailing Address Eckersbergsgate 30			
Mailing Address			
City	Oslo	State	Country NO
ZIP		0260	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Matti		Putkonen	
Inventor's Signature 		Date	
Residence: City	Espoo	State	Country FI
Citizenship FI			
Mailing Address Luuvanpuisto 5			
Mailing Address			
City	Espoo	State	Country FI
ZIP		02620	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Citizenship			
Mailing Address			
Mailing Address			
City		State	Country
ZIP			

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