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SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
13/150,371	06/01/2011	375	2611	I-2-0054US12
RULE				
APPLICANTS Gary R. Lomp, Centerport, NY;				
** CONTINUING DATA ***** This application is a CON of 12/712,657 02/25/2010 PAT 7,961,822 which is a CON of 10/819,625 04/07/2004 PAT 7,697,643 which is a CON of 10/071,974 02/07/2002 PAT 6,721,350 which is a CON of 10/027,693 10/19/2001 PAT 6,611,548 which is a CON of 09/716,864 11/20/2000 PAT 6,330,272 which is a CON of 09/277,400 03/26/1999 PAT 6,175,586 which is a CON of 08/891,236 07/10/1997 PAT 5,995,538 which is a DIV of 08/743,379 11/04/1996 PAT 5,835,527 which is a CON of 08/368,710 01/04/1995 PAT 5,574,747				
** FOREIGN APPLICATIONS *****				
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/10/2011				
Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No /SAM K AHN/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY NY	SHEETS DRAWINGS 23
			TOTAL CLAIMS 12	INDEPENDENT CLAIMS 3
ADDRESS VOLPE AND KOENIG, P.C. DEPT. ICC UNITED PLAZA 30 SOUTH 17TH STREET PHILADELPHIA, PA 19103 UNITED STATES				
TITLE SETTING A TRANSMISSION POWER LEVEL FOR A MOBILE UNIT				
FILING FEE RECEIVED 1090	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	