


|   |  |  |
|---|--|--|
| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>29331169 | <b>Applicant(s)/Patent Under Reexamination</b><br>KISHLER ET AL. |
|   | <b>Examiner</b><br>JOHN WINDMULLER         | <b>Art Unit</b><br>2914  |

| ORIGINAL                  |                                   |  |          |  |  | INTERNATIONAL CLASSIFICATION |  |  |  |  |             |  |  |  |  |
|---------------------------|-----------------------------------|--|----------|--|--|------------------------------|--|--|--|--|-------------|--|--|--|--|
| CLASS                     |                                   |  | SUBCLASS |  |  | CLAIMED                      |  |  |  |  | NON-CLAIMED |  |  |  |  |
| D14                       |                                   |  | 230      |  |  | 14 / 03                      |  |  |  |  |             |  |  |  |  |
| <b>CROSS REFERENCE(S)</b> |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
| CLASS                     | SUBCLASS (ONE SUBCLASS PER BLOCK) |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |
|                           |                                   |  |          |  |  |                              |  |  |  |  |             |  |  |  |  |

| <input checked="" type="checkbox"/> <b>Claims renumbered in the same order as presented by applicant</b> <input type="checkbox"/> <b>CPA</b> <input type="checkbox"/> <b>T.D.</b> <input type="checkbox"/> <b>R.1.47</b> |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|--|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final  | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

|  |                       |   |  |                     |                   |   |      |
|--|-----------------------|---|--|---------------------|-------------------|---|------|
| /JOHN WINDMULLER/<br><br>(Assistant Examiner)  | 7/27/09<br><br>(Date) | <input checked="" type="checkbox"/> Use images from artifact folder<br><input checked="" type="checkbox"/> Do not use images from artifact folder | <b>Total Claims Allowed:</b><br><br>1  |                     |                   |   |      |
| /T. Chase Nelson/<br>Supervisory Patent Examiner.Art Unit 2914<br><br>(Primary Examiner) |                       | 08/02/2009<br><br>(Date)  | <table border="1"> <tr> <td>O.G. Print Claim(s)</td> <td>O.G. Print Figure</td> </tr> <tr> <td>1</td> <td>1, 6</td> </tr> </table> | O.G. Print Claim(s) | O.G. Print Figure | 1 | 1, 6 |
| O.G. Print Claim(s)  | O.G. Print Figure     |   |  |                     |                   |   |      |
| 1  | 1, 6                  |   |  |                     |                   |   |      |