PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 17/177,291			
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR		THER THAN MALL ENTITY	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		FEE(\$)	]	RATE(\$)	FEE(\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))		N/	N/A		N/A			1	N/A	320	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))		N/	N/A		N/A			1	N/A	700	
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		N/	N/A		N/A			1	N/A	800	
TOTAL CLAIMS (37 CFR 1.16(i))		13	13 minus 20=		*			OR	× 100 =	0.00	
INDEPENDENT CLAIMS (37 CFR 1.16(h))		2 minus 3 =		= *				1	× 480 =	0.00	
APPLICATION SIZE FEE (37 CFR 1.16(s))If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									0.00		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								]		0.00	
* If the difference in column 1 is less than zero, enter "0" in column 2. TOTA								1	TOTAL	1820	
ΓA		(Column 1) CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3) PRESENT EXTRA	SMAL RATE(\$)	ADDITIONAL FEE(\$)		SMALL RATE(\$)	ADDITIONAL FEE(\$)	
1ENT	Total * (37 CFR 1.16(i))	AMENDMENT	Minus *	PAID FOR	=	x =	_		x =		
ENDM	(37 CFR 1.16(i)) Independent (37 CFR 1.16(h))	*	Minus *	**	=	x =	_	OR	x =		
AME	Application Size Fee	(37 CFR 1.16(s))						1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							OR			
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)		_	-			
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE(\$)	ADDITIONAL FEE(\$)		RATE(\$)	ADDITIONAL FEE(\$)	
ME	Total * (37 CFR 1.16(i))	*	Minus *	*	=	x =	-	OR	x =		
AMENDMENT	Independent * (37 CFR 1.16(h))	*	Minus *	**	=	x =	=	OR	x =		
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							OR			
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
*	* If the "Highest Nurr	mber Previously	y Paid For' Paid For" IN	IN THIS SPA THIS SPACE is	CE is less than s less than 3, ent	mn 3. 20, enter "20".	ox in column 1.				

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