



Thank you for your interest in Coghlan's Ltd. as a resource for pursuing your ideas. Before completing this form and submitting your invention for consideration, please read the **INVENTION SUBMISSION PROCEDURES** document. If you have any questions regarding this document, please seek counsel prior to your submission.

The following checklist is provided to ensure that you submit a complete disclosure:

_____ 1. Executed **DISCLOSURE AGREEMENT**

_____ 2. **PROOF OF APPLICATION/PATENT** - Provide **ONE** of the following:

_____ a. Copy of currently-pending provisional application including: specification, claims (if any), drawings, filing receipt.

_____ b. Copy of non-provisional patent application, including specification, claims, drawings and filing receipt. If your application has not been published, you must also include the status of the application

_____ c. Publication Number if your patent application has been published. My publication number is _____ .

_____ d. Patent Number if your patent application has issued into a patent. My patent number is _____ .

_____ e. This submission is not the subject of a currently pending patent application or issued patent and is made without expectation of compensation.

_____ 3. **MATERIAL "PRIOR ART"**: Attach a list of Prior Art as described in the INVENTION SUBMISSION PROCEDURES document. This can be an Information Disclosure Statement as filed with the USPTO.

_____ 4. **ADDITIONAL MATERIALS**: Additional materials that might help explain how your invention is used, such as a **BRIEF** video. Please do not send any disclosure not already disclosed in a pending patent application or issued patent!

_____ 5. **CONTACT INFORMATION**

Name: _____

Address: _____ City: _____

State/Province: _____ Country: _____ Zipcode/Postal Code: _____

E-mail: _____ Telephone: _____

6. EMPLOYMENT INFORMATION

Current Employer: _____

Address: _____

City: _____ State/Province: _____

Country: _____ Zipcode/Postal Code: _____

Employer(s) at time of Conception or Development (if different):

Employer Name: _____

Address: _____ City: _____

State/Province: _____ Country: _____ Zipcode/Postal Code: _____

Conception of idea:

Address: _____ City: _____

State/Province: _____ Country: _____ Zipcode/Postal Code: _____

Development of idea:

Address: _____ City: _____

State/Province: _____ Country: _____ Zipcode/Postal Code: _____

If either of these employers, or anyone else, has rights in this submission, please explain briefly:

Make your submission either by e-mail to: productmgr@coghlan.com or via USPS or other carrier to: Coghlan's Ltd..

ATTN: ProductManager, 121 Irene Street, Winnipeg, Manitoba, Canada R3T 4C7

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