

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

COMPLAINT REGARDING INVENTION PROMOTER

Instructions: Read the reverse side of this form before completing and submitting the form. Complete as much of the form as possible and return it to the U.S. Patent and Trademark Office at the address given on the reverse side. Please type or write clearly.

Invention Promoter's Name: Advent Product Development
 Invention Promoter's Address: 100 Menlo Park Suite 215 FAX# 732-452-1286
 City Edison State New Jersey Zip Code 08837
 Complainant's Name: Mary Traianello
 Complainant's Address: 117 Wirt Avenue
 City S.I. State NY Zip Code 10309
 Customer's Name: Mary Traianello

RECEIVED
 2002 NOV 20 PM 1:53
 OFFICE OF THE
 COMMISSIONER FOR PATENTS

WHAT IS YOUR COMPLAINT?

Please be as specific as possible within the space provided

Name of mass media invention promoter advertised:

Television

Invention promotion services offered to be performed:

Patent Search, Drawings, Patent

Explanation of complaint between customer and invention promoter:

I was lead to believe that for \$1,000.
The cost of Phase 1. I would have a patent.
Instead I got a "report" in a nicely bound
book and a request for more money for Phase 2.
From what I can see the only thing they did
do was file a \$10.00 Disclosure Document form.

Signed: Mary Traianello Date: 11/20/02