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### RECORD OF INVENTION

BE IT KNOWN THAT \_\_\_\_\_  
Residing at \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
Email \_\_\_\_\_

has conceived the invention illustrated and described within this RECORD OF INVENTION document which is called \_\_\_\_\_

and has this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
disclosed to us this invention and we understand its construction and use.  
Witness \_\_\_\_\_ Witness \_\_\_\_\_  
(Optional) (Optional)

Date of original conception of idea \_\_\_\_\_  
Date first disclosed idea to others \_\_\_\_\_  
Date sketches were first made \_\_\_\_\_  
Working Model ( ) has ( ) has not (check one) been made.  
Has a patent search been made? \_\_\_\_\_ When? \_\_\_\_\_  
What did search reveal in relation to existing patents? \_\_\_\_\_

Are any particular molds or tools needed to make your inventions? \_\_\_\_\_

State of I, \_\_\_\_\_  
(Type or Print Your Name)

\_\_\_\_\_ being duly sworn, upon oath depose and state that I believe myself to be the original, first and sole inventor of the device described herein, and that all dates and statements made herein are true to the best of my knowledge and belief.

County of \_\_\_\_\_  
\_\_\_\_\_  
(Your Signature)

Sworn and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_ 20-\_\_\_\_

Notary Public  
\_\_\_\_\_  
(Optional)