

number:	
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INVENTION DISCLOSURE

1. Title of the invention				
2. Inventor(s)				
	REPRESENTATIVE			
Name				
Affiliation				
e-mail	Telephone			
Signature				
Name				
Affiliation				
e-mail	Telephone			
Signature				
(if required include mor	e tables)			
(ii roquirou iriolado filor	o tablod)			
3. Purpose of the inv	rention			
4. Detailed description of the invention				



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NO:		
on.		
To whom it was made? (name)	When it was made? (dd/mm/yyyy)	
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el		
CI		
GI		
GI		
	Date (dd/mm/) / / NO: on. To whom it was made? (name)	

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Describe the outstanding challenges in order to turn your invention into an marketable innovation (product, service, etc)					
		,			
	not yet or done?	When was it made for the first time? (dd/mm/yyyy)			
Reduction to practice	307101	(33,, 33,33)			
(prototype)		7 7			
Public use of invention		1 1			
9. Program or Contrac	et				
Was the invention made	in the conte	ext of a specific prog	ram, grant or contract?		
YES:		NO:			
If YES, provide the follow	ving informa	ition			
found so	found source grant/contract number				
If NO, provide an explan	ation of whe	ere and how the inve	ntion was made.		
10. Witnesses (a person who validate this information)					
Name					
Affiliation			Talanhana		
e-mail Signature			Telephone		

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11. Relevant information of this document

	Name	Date (dd/mm/yyyy)
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