

SQUARE DEAL CONSULTING, LLC “PROJECT INFORMATION FORM”

Thank you for your interest in obtaining technology transfer services from Square Deal Consulting, LLC (“SDC”). Please complete this Project Information Form (“PIF”) by providing as much of the requested information as possible. Although SDC will endeavor to treat the PIF as “Confidential Information,” a non-disclosure agreement (“NDA”) may be in your best interest, and we can provide one for your consideration. There is no cost for you to complete the PIF or enter into an NDA.

The PIF will help SDC determine if we can provide you with the requested services. If SDC can assist you, the PIF will allow SDC to provide you with a draft contract and cost estimate for the project. SDC encourages you to provide as much information as you can to facilitate the timely drafting of the contract and estimate. Any information added after the submission of the PIF may extend the contract negotiation period and impact any initially estimated cost.

If you do not believe a particular section of the PIF requires an answer, SDC requests that you please enter “None” or N/A” as appropriate. This will let SDC know that you have officially considered the request and elected not to answer.

If you have questions about or need assistance with the completion of the PIF, contact SDC by email at david@square-deal-consulting.com.

Once all sections are completed, please email a signed PDF of the completed PIF to the email address above.

I. CLIENT INFORMATION

A. Client (Organization with Signatory Authority for any agreements with SDC):

Name:

Address:

State/Country of Incorporation:

Name of Parent Company (if applicable):

B. Client's Representative(s) to whom Official Communications and Deliverables (including requested drafts) regarding the Project should be sent:

Name:

Title:

Address (if different than the Organization Address):

Phone:

E-mail:

(Please add any additional Representatives here by using the same format as above)

C. Client's Legal Representative:

Name:
Title:
Address (if different than the Organization Address):
Phone:
E-mail:

D. Applicant's Representative for Invoices:

Name:
Title:
Address (if different than the Organization Address):
Phone:
E-mail:

E. Description of the Applicant:

- 1) Approximate number of employees:
- 2) Qualification as Small Business: _____ Yes _____ No
- 3) Date of Establishment/Incorporation:
- 4) Number of Affiliates and Subsidiaries:
- 5) Accept PDF execution copy of any agreement? _____ Yes _____ No
- 6) Accept Digital Signature in the execution copy of any agreement? _____ Yes _____ No

II. **SERVICES**

Type of Services Requested (Check all that apply; this will directly impact the cost estimate):

A. **Matters of Patent Management**

_____ **Initial Invention Report Review and Filing Recommendation** (does not include a Prior Art Search, but may include an evaluation of any independently identified potential prior art)

_____ **Patent Portfolio Audit** (includes Mid- to-Late-Stage Filing Recommendations, Abandonment Recommendations, European Validation Recommendations, and Annuity Payment Recommendations)

_____ **Patent Prosecution Management** (includes the review of patent office

actions, development of response strategies, management of patent counsel, and review/approval of patent counsel's draft responses)

_____ **Invention Marketing Campaign** (includes technology abstract writing, remote target marketing campaigns, and in-person marketing campaigns (must include travel expenses))

B. Matters of Agreement Negotiation

_____ **License Application Completion/Review** (assistance completing license applications, final review of license application to be submitted, and review of applications submitted to Clients)

_____ **Technology Valuation/Term Sheet Development** (includes review of the technology to be licensed and the proposal of a range of financial terms for negotiation)

_____ **New Agreement Negotiation** (please specify one of the following)

- _____ In-licensing
- _____ Out-Licensing
- _____ Collaborative Agreement

_____ **Amendment Negotiation** (please specify one of the following)

- _____ In-licensing
- _____ Out-Licensing
- _____ Collaborative Agreement

_____ **Other Monitoring and Enforcement Matters** (includes identification, notification, and resolution of delinquencies)

C. Other Matters

_____ **Assistance with Technology Transfer Matters Before the Federal Government** (includes developing strategies for completing license applications, objecting to Notices of Intent to Grant, and appealing adverse licensing decisions)

_____ **Development/Review of Model Agreements and License Applications** (includes the review and suggested revision of model agreements and license applications)

_____ **Development/Review of Standard Operating Procedures** (includes the review and suggested revision of office SOPs)

_____ **Seminars and Speaking Engagements** (SDC is open to speaking engagements that do not require the disclosure of SDC proprietary information,

including but not limited to specific valuation strategies)

_____ **Retainer Agreement** (retainers are available on a monthly basis, securing up to 40 hours of availability per month)

_____ **Other** (if you believe SDC may be helpful regarding a service not explicitly mentioned here, we encourage you to contact us to discuss the matter before submitting a PIF)

D. Will you require SDC to communicate with any Affiliates: __ Yes __ No

Name of Affiliate:

Address of Affiliate:

Name of Affiliate Representative:

Email Address of Affiliate Representative:

Phone Number of Affiliate Representative:

(Please add any additional Affiliates here by using the same format as above)

E. Will you require SDC to communicate with any Third-Parties: __ Yes __ No

Name of Third-Party:

Address of Third-Party:

Name of Third-Party Representative:

Email Address of Third-Party Representative:

Phone Number of Third-Party Representative:

(Please add any additional Third-Parties here by using the same format as above)

III. PROJECT DESCRIPTION

A. Provide a detailed description of the technology that will be the subject of the proposed project. The use of separate sheets attached at the end of the submitted form is encouraged.

- 1) Provide a description of the technology and any related documentation (including confidential information if an NDA is executed).
- 2) What is your proposed deadline for completion of the project?
- 3) Describe the degree of communication you require regarding the project (e.g., do you want to see all drafts or only final drafts. Please be clear on any specific instructions or procedures so they can be included in the work contract.)
- 4) What deliverable(s) do you wish to receive during and upon completion of the project?

- 5) Provide any other information you believe should be considered when drafting a work contract.

B. What is your budget for the project? Please include:

- 1) A proposed cost for obtaining the requested services from SDC. We will do our best to accommodate your needs, but we want to ensure we are within your expected price range before proposing a contract.
- 2) The proposed financial terms you are willing to accept if you are requesting negotiation services (this includes both in-licensing and out-licensing activities). We recommend that you provide this even if you are requesting that SDC perform an independent valuation.

C. Additional Proposed Contract Terms (if any):

IV. SIGNATURE

I certify, to the best of my knowledge, that all the information provided on this application and on attachments to this form is complete and accurate.

Signature of Client's Authorized Representative

Date

Print/Type Name

Title

The responses in this form will be treated as privileged and confidential information to the fullest extent permitted by law. This form does not offer any promise or guarantee of confidentiality other than what is specifically stated. It is recommended that Client obtain an NDA with SDC prior to submitting this PIF in any form or format.