

Santa Clara County Bar Association  
Lawyer Referral Service

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Office Address: \_\_\_\_\_  
(Zip code)

**Experience Statement - Intellectual Property**

Within the last five (5) years I have handled (been personally responsible for) the following matters which demonstrates in my judgment that I meet or exceed the minimum experience qualifications as specified below. (ITEMIZE ONLY THE MINIMUM NUMBER REQUIRED).

**Intellectual Property Qualifications**

The undersigned represents that he/she is registered with the U.S. Patent Office and has been so registered since \_\_\_\_\_.  
Date

The undersigned further represents that he/she engages in an intellectual property practice in the following area(s): (check applicable boxes)

( ) Patent

\_\_\_\_\_ Mechanical Inventions

\_\_\_\_\_ Chemical Inventions

\_\_\_\_\_ Electrical-Electronic Inventions

( ) Trademarks / Copyright / Licensing Agreements

List below, for each checked area, four (4) patent applications (prosecuted through issuance ) and/or four (4) trademark registrations (or copyrights) and/or four (4) licensing agreements.

(You may apply for any or all of the above.)

\_\_\_\_\_

Identification: If matter is on public record, identify court of agency and give file number; if office matter only, give office designation but Omits client's name.

Date: Give month and year the required experience was completed in the matter.

Patent - Mechanical Invention (identification and date)

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fourth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

**Patent - Chemical Inventions (identification and date)**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fourth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

**Patent - Electrical - Electronic Inventions (identifications and date)**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fourth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

**Trademarks/Copyrights (identification and date)**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fourth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

**Licensing Agreements (identification and date)**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fourth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

I submit the above information in support of my application for panel membership in the Lawyer Referral Service. I agree to cooperate with the Service in Facilitating reasonable verification thereof and otherwise reviewing my qualifications for the Intellectual Law Panel under the Rules. If further declare under penalty of perjury that the foregoing is true and correct in all respects.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant