

## **Instructions for AIA/80**

### **Power of Attorney to Prosecute Applications Before the USPTO**

This power of attorney form is for use by assignees who want to become the applicant (see 37 CFR 1.46(c)) and appoint a power of attorney. The form may also be used by assignee-applicants who were named as the applicant when the application was filed, if desired, though use of the Form AIA/82 is recommended. In either situation, this form must be accompanied by a statement under 37 CFR 3.73(c) (Form AIA/96) that identifies the application to which the power of attorney is directed. The Form AIA/80 is styled like a general power of attorney. For this reason, it does not contain patent application information boxes and should not identify a specific patent application, since the Form AIA/96 will identify the application.

In a patent application filed on or after September 16, 2012, an assignee who is not the applicant may sign a power of attorney only if the assignee becomes the applicant per 37 CFR 1.46(c). This is because the power of attorney must be signed by the applicant for patent.

The power of attorney must be signed by someone who is authorized to act on behalf of the assignee-applicant (*i.e.*, a person with a title that carries apparent authority, or a person who includes a statement of authorization to act.). A patent practitioner is not authorized to act on behalf of an assignee simply by existence of authority to prosecute an application. However, where an assignee gives the practitioner specific authority to act on behalf of the assignee (*e.g.*, authority given by organizational resolution), a practitioner may sign the AIA/80 on behalf of the assignee.

These instructions track the various boxes and information items that must be supplied to complete the form.

---

**I hereby appoint:** For the two check boxes, check only one box. Check the first box entitled “Practitioners Associated with Customer Number” box if the practitioners associated with a specific Customer Number are being appointed as having power of attorney, and type the Customer Number in the box. Check the second box entitled “Practitioner(s) named below” if specific patent practitioners by registration number (up to 10) are being appointed as having power of attorney, and print or type the name and registration number of each appointed practitioner.

**Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(c) to:** For the two check boxes, check only one box. Check the first box if the address associated with a Customer Number is being designated as the correspondence address, and print or type the Customer Number in the box. Generally, Customer Numbers are used by patent practitioners and law firms and are optional. Check the

second box entitled “Firm or Individual Name” box if a correspondence address is being printed or typed into the fields. Note: only a single correspondence address may be designated for the patent application.

**Assignee Name and Address:** Print or type in the name of the assignee and mailing address where the assignee customarily receives mail (e.g., home address, business address, post office box).

**SIGNATURE of Assignee of Record:**

- **Signature:** The person identified on the Name line should sign the power of attorney form. The power of attorney may be signed with a handwritten signature in dark ink (37 CFR 1.4(d)(1)) or with an “S-signature” (a typed signature between forward slashes, 37 CFR 1.4(d)(2)). Note: While 37 CFR 3.73(d)(3) permits a patent practitioner of record to sign a statement under 37 CFR 3.73(c), a power of attorney to a patent practitioner does not make that practitioner an official of the assignee or empower the practitioner to sign the power of attorney on behalf of the assignee.
- **Date:** Print or type the date the power of attorney is being signed. The person identified on the Name line is not required to date the power of attorney form. However, the Office recommends providing a date.
- **Name:** Print or type the legal name (e.g., Given Name (first and middle (if any)) and Family Name or Surname) of the person who is signing the power of attorney on behalf of the assignee.
- **Telephone:** Print or type the telephone number of the person identified on the Name line. The person identified on the Name line is not required to provide a telephone number. However, the Office recommends doing so.
- **Title:** Print or type the title of the person who is signing the power of attorney.