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FAX TRANSMISSION

DATE March 10, 2010

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MATTER 21122.0043P1

TOTAL NO. OF PAGES, INCLUDING THIS PAGE 5

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MESSAGE

PCT/US2009/069652

Request for Recording of a Change

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IN THE INTERNATIONAL BUREAU OF WIPO

In Re Application of: THE BOARD OF TRUSTEES OF THE UNIVERSITY
OF ALABAMA
Int. Appln. No.: PCT/US2009/069652
Int. Filing Date: December 29, 2009
Title: DUAL FUNCTIONING IONIC LIQUIDS AND
SALTS THEREOF
Attorney Docket No.: 21122.0043P1

To: The International Bureau of WIPO
34, chemin de Colombettes
1211 Geneva 20, Switzerland

cc: Attn: RO/US
Mail Stop PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR RECORDING OF A CHANGE UNDER RULE 92bis

Dear Sir or Madam:

Pursuant to PCT Rule 92bis, Applicants hereby request the International Bureau of WIPO add the following Applicant and Applicant/Inventors to those already recited in the originally filed PCT Request form:

Applicant Only

QUEEN'S UNIVERSITY BELFAST
University Road
Belfast BT7 1NN
Northern Ireland
United Kingdom

Applicant for *All Designated States except the United States of America*

Applicant/Inventor

SCOTT, Janet L.
19 Bolton Road
Port Sunlight, CH62 5DQ
United Kingdom

Applicant for *the United States of America Only*

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International Patent Application No. PCT/US2009/069652
Attorney Docket No.: 21122.0043P1
Page 2

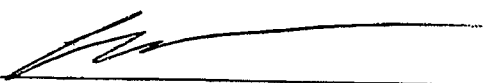
BICA, Katharina
Hutteldorferstrasse 131/9
1104 Vienna, Austria
Applicant for *the United States of America Only*

SEDDON, Kenneth
Tara-145 Millisle Road
Donaghadee
Northern Ireland BT21 0LA
Applicant for *the United States of America Only*

Replacement sheets 3 and 3a of the PCT Request form are enclosed.
Applicants respectfully request that the International Bureau record the addition of the Applicant and Applicant/Inventors above and notify the Applicant's agent (via Form PCT/IB/306) that the requested changes have been made, as early as possible.

Thank you for your attention to this matter. Applicants invite the Authorized Officer to contact the undersigned agent/attorney if there are any questions related to this matter.

Respectfully submitted,
BALLARD SPAHR LLP



Christopher L. Curfman
Reg. No. 52,787

Date: March 10, 2010

BALLARD SPAHR LLP
Suite 1000
999 Peachtree Street
Atlanta, Georgia 30309-3915
Telephone: 678.420.9300
Facsimile : 678.420.9301

1041079

Sheet No. ...3...

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)*If none of the following sub-boxes is used, this sheet should not be included in the request.*

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

MACFARLANE, Douglas
9 Campertown St.
Brighton East 3187
Victoria, Australia

This person is:

- applicant only
 applicant and inventor
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:
AUState (that is, country) of residence:
AU

This person is applicant for the purposes of:

- all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

TURANJANIN, Jelena
4 Westbrook Place
Cairnlea 3023
Victoria, Australia

This person is:

- applicant only
 applicant and inventor
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:
AUState (that is, country) of residence:
AU

This person is applicant for the purposes of:

- all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

DEAN, Pamela M.
56 Virginia Street
Mount Waverley 3149
Victoria, Australia

This person is:

- applicant only
 applicant and inventor
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:
GBState (that is, country) of residence:
AU

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QUEEN'S UNIVERSITY BELFAST
University Road
Belfast BT7 1NN
Northern Ireland
GB

This person is:

- applicant only
 applicant and inventor
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:
GBState (that is, country) of residence:
GB

This person is applicant for the purposes of:

- all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

 Further applicants and/or (further) inventors are indicated on another continuation sheet.

Form PCT/RO/I01 (continuation sheet) (April 2007)

See Notes to the request form

Sheet No. 3a . . .

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) SCOTT, Janet L. 19 Bolton Road Port Sunlight, CH62 5DQ United Kingdom	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: AU	State (that is, country) of residence: GB
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) BICA, Katharina Hutteldorferstrasse 131/9 1104 Vienna AT	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: AT	State (that is, country) of residence: AT
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) SEDDON, Kenneth R. "Tara"145 Millisle Road Donaghadee Northern Ireland BT21 0LA	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: GB	State (that is, country) of residence: AT
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) (Empty)	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality:	State (that is, country) of residence:
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.	

Form PCT/RO/101 (continuation sheet) (April 2007)

See Notes to the request form