

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

PCT/US10/38452

International Application No.

14 JUN 2010 (14.06.10)

International Filing Date

PCT INTERNATIONAL APPLICATION
RO/US

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum)

238497

Box No. I TITLE OF INVENTION	
FIBER OPTIC SYSTEM AND METHOD FOR TEMPERATURE CONTROL AND COMPENSATION FOR FIBER OPTIC CURRENT SENSING SYSTEMS	
Box No. II APPLICANT <input type="checkbox"/> This person is also inventor	
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.)	Telephone No. 203-944-6755
GENERAL ELECTRIC COMPANY 1 River Road Schenectady, New York 12345 United States of America	Facsimile No. 203-944-6712
	Applicant's registration No. with the Office
<input checked="" type="checkbox"/> E-mail authorization: Marking this check-box authorizes the receiving Office, the International Searching Authority, the International Bureau and the International Preliminary Examining Authority to use the e-mail address indicated in this Box to send, if the Office or Authority so wishes, advance copies of notifications in respect of this international application. (See also the Notes to Boxes Nos. II and III.)	E-mail address GPO.mail@ge.com
State (that is, country) of nationality: US	State (that is, country) of residence: US
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" 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	
Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
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.)	Telephone No. 203-944-6755
ZHANG, Douglas D. Patent Counsel GENERAL ELECTRIC COMPANY Global Patent Operation 2 Corporate Drive, Suite 648 Shelton, CT 06484 United States of America	Facsimile No. 203-944-6712
	Agent's registration No. with the Office 37985
<input checked="" type="checkbox"/> E-mail authorization: Marking this check-box authorizes the receiving Office, the International Searching Authority, the International Bureau and the International Preliminary Examining Authority to use the e-mail address indicated in this Box to send, if the Office or Authority so wishes, advance copies of notifications in respect of this international application. (See also the Notes to Boxes Nos. II and III.)	E-mail address GPO.mail@ge.com
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<p><i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i></p>	
<p>Name and address: <i>(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.)</i></p> <p>LEE, Boon Kwee 36 Willowbrook Terrace Clifton Park, New York 12065 United States of America</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
<p>State <i>(that is, country)</i> of nationality:</p> <p>MY</p>	<p>State <i>(that is, country)</i> of residence:</p> <p>US</p>
<p>This person is applicant for the purposes of:</p> <p><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</p>	
<p>Name and address: <i>(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.)</i></p> <p>GUIDA, Renato 620 Church Street Wynantskill, New York 12198 United States of America</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
<p>State <i>(that is, country)</i> of nationality:</p> <p>US</p>	<p>State <i>(that is, country)</i> of residence:</p> <p>US</p>
<p>This person is applicant for the purposes of:</p> <p><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</p>	
<p>Name and address: <i>(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.)</i></p> <p>WU, Juntao 1333 Hawthorn Road Niskayuna, New York 12309 United States of America</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
<p>State <i>(that is, country)</i> of nationality:</p> <p>CN</p>	<p>State <i>(that is, country)</i> of residence:</p> <p>US</p>
<p>This person is applicant for the purposes of:</p> <p><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</p>	
<p>Name and address: <i>(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.)</i></p> <p>KRAEMER, Sebastian Gerhard Maxim Richard-Strauss-Str. 40 Muenchen, Germany 81677 Germany</p>	<p>This person is:</p> <p><input type="checkbox"/> applicant only</p> <p><input checked="" type="checkbox"/> applicant and inventor</p> <p><input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
<p>State <i>(that is, country)</i> of nationality:</p> <p>DE</p>	<p>State <i>(that is, country)</i> of residence:</p> <p>DE</p>
<p>This person is applicant for the purposes of:</p> <p><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</p>	
<p><input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.</p>	

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: <i>(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.)</i> DEKATE, Sachin Narahari 602 Connor Court Niskayuna, New York 12309 United States of America	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>
Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality: <p style="text-align: center;">IN</p>	State <i>(that is, country)</i> of residence: <p style="text-align: center;">US</p>
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: <i>(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.)</i>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>
Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality:	State <i>(that is, country)</i> 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	
Name and address: <i>(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.)</i>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>
Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality:	State <i>(that is, country)</i> 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	
Name and address: <i>(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.)</i>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>
Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality:	State <i>(that is, country)</i> 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	
Name and address: <i>(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.)</i>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>
Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality:	State <i>(that is, country)</i> 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.	

Supplemental Box *If the Supplemental Box is not used, this sheet should not be included in the request.*

1. *If, in any of the Boxes, except Boxes Nos. VIII(i) to (v) for which a special continuation box is provided, the space is insufficient to furnish all the information: in such case, write "Continuation of Box No...." (indicate the number of the Box) and furnish the information in the same manner as required according to the captions of the Box in which the space was insufficient, in particular:*
- (i) *if more than one person is to be indicated as applicant and/or inventor and no "continuation sheet" is available: in such case, write "Continuation of Box No. III" and indicate for each additional person the same type of information as required in Box No. III. 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;*
 - (ii) *if, in Box No. II or in any of the sub-boxes of Box No. III, the indication "the States indicated in the Supplemental Box" is checked: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the applicant(s) involved and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is applicant;*
 - (iii) *if, in Box No. II or in any of the sub-boxes of Box No. III, the inventor or the inventor/applicant is not inventor for the purposes of all designated States or for the purposes of the United States of America: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is inventor;*
 - (iv) *if, in addition to the agent(s) indicated in Box No. IV, there are further agents: in such case, write "Continuation of Box No. IV" and indicate for each further agent the same type of information as required in Box No. IV;*
 - (v) *if, in Box No. VI, there are more than four earlier applications whose priority is claimed: in such case, write "Continuation of Box No. VI" and indicate for each additional earlier application the same type of information as required in Box No. VI.*
2. *If the applicant intends to make an indication of the wish that the international application be treated, in certain designated States, as an application for a patent of addition, certificate of addition, inventor's certificate of addition or utility certificate of addition: in such a case, write the name or two-letter code of each designated State concerned and the indication "patent of addition," "certificate of addition," "inventor's certificate of addition" or "utility certificate of addition," the number of the parent application or parent patent or other parent grant and the date of grant of the parent patent or other parent grant or the date of filing of the parent application (Rules 4.11(a)(i) and 49bis.1(a) or (b)).*
3. *If the applicant intends to make an indication of the wish that the international application be treated, in the United States of America, as a continuation or continuation-in-part of an earlier application: in such a case, write "United States of America" or "US" and the indication "continuation" or "continuation-in-part" and the number and the filing date of the parent application (Rules 4.11(a)(ii) and 49bis.1(d)).*

CONTINUATION OF BOX IV

Catherine J. Winter
Jonathan E. Thomas
Mark A. Conklin
Michael M. Gribus
Peter T. DiMauro
John A. Kramer
Stephen G. Midgley
Roger C. Phillips

GENERAL ELECTRIC COMPANY
Global Patent Operation
2 Corporate Drive, Suite 648
Sheiton, CT 06484
United States of America

Box No. V DESIGNATIONS

The filing of this request constitutes under Rule 4.9(a) the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.

However,

- DE Germany is not designated for any kind of national protection
- JP Japan is not designated for any kind of national protection
- KR Republic of Korea is not designated for any kind of national protection
- RU Russian Federation is not designated for any kind of national protection

(The check-boxes above may only be used to exclude (irrevocably) the designations concerned if, at the time of filing or subsequently under Rule 26bis.1, the international application contains in Box No. VI a priority claim to an earlier national application filed in the particular State concerned, in order to avoid the ceasing of the effect, under the national law, of this earlier national application.)

Box No. VI PRIORITY CLAIM

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application <i>(day/month/year)</i>	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application: regional Office	international application: receiving Office
item (1) August 27, 2009	12/548,512	US		
item (2)				
item (3)				
item (4)				

Further priority claims are indicated in the Supplemental Box.

Transmit certified copy: the receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) *(only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office)* identified above as:

- all items item (1) item (2) item (3) item (4) other, see Supplemental Box

Restore the right of priority: the receiving Office is requested to restore the right of priority for the earlier application(s) identified above or in the Supplemental Box as item(s) (.....). *(See also the Notes to Box No. VI: further information must be provided to support a request to restore the right of priority.)*

Incorporation by reference: where an element of the international application referred to in Article 11(1)(iii)(d) or (e) or a part of the description, claims or drawings referred to in Rule 20.5(a) is not otherwise contained in this international application but is completely contained in an earlier application whose priority is claimed on the date on which one or more elements referred to in Article 11(1)(iii) were first received by the receiving Office, that element or part is, subject to confirmation under Rule 20.6, incorporated by reference in this international application for the purposes of Rule 20.6.

Box No. VII INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA) *(if more than one International Searching Authority is competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):*


ISA/ EP

Box No. IX CHECK LIST; LANGUAGE OF FILING

This international application contains:	This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):	Number of items
(a) on paper, the following number of sheets:		
request (including declaration and supplemental sheets) : 8	1. <input checked="" type="checkbox"/> fee calculation sheet : 1	
description (excluding sequence listing and/or tables related thereto) : 13	2. <input type="checkbox"/> original separate power of attorney : :	
claims : 3	3. <input type="checkbox"/> original general power of attorney : :	
abstract : 1	4. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any: : 2	
drawings : 12	5. <input type="checkbox"/> statement explaining lack of signature : :	
Sub-total number of sheets : 37	6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s): : :	
sequence listing : :	7. <input type="checkbox"/> translation of international application into (language): : :	
tables related thereto : :	8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material : :	
<i>(for both, actual number of sheets if filed on paper, whether or not also filed in electronic form; see (c) below)</i>	9. <input type="checkbox"/> sequence listing in electronic form (indicate type and number of carriers)	
Total number of sheets : 37	(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) : :	
(b) <input type="checkbox"/> only in electronic form (Section 801(a)(i))	(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter : :	
(i) <input type="checkbox"/> sequence listing	(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column : :	
(ii) <input type="checkbox"/> tables related thereto	10. <input type="checkbox"/> tables in electronic form related to sequence listing (indicate type and number of carriers)	
(c) <input type="checkbox"/> also in electronic form (Section 801(a)(ii))	(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) : :	
(i) <input type="checkbox"/> sequence listing	(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) : :	
(ii) <input type="checkbox"/> tables related thereto	(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column : :	
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the	11. <input type="checkbox"/> copy of results of earlier search(es) (Rule 12bis.1(a)) : :	
<input type="checkbox"/> sequence listing:	12. <input checked="" type="checkbox"/> other (specify): Declaration sheet (ii), Declaration sheet (iii) : 2	
<input type="checkbox"/> tables related thereto:		
<i>(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)</i>		

Figure of the drawings which should accompany the abstract: 3	Language of filing of the international application: English
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Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE
Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).


Douglas D. ZHANG
 Patent Counsel
 General Electric Company
 Global Patent Operation

For receiving Office use only	
1. Date of actual receipt of the purported international application: 14 JUN 2010 (14.06.10)	2. Drawings: <input type="checkbox"/> received: <input type="checkbox"/> not received:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:	
4. Date of timely receipt of the required corrections under PCT Article 11(2):	
5. International Searching Authority (if two or more are competent): ISA / EP	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid

For International Bureau use only
Date of receipt of the record copy by the International Bureau: