



<DATE>

<UC EMPLOYEE>  
<UC ADDRESS>  
MC <MAIL CODE>

Subject: <Inter-Office> Memo of Understanding  
Case: <CASE TITLE>  
Case ID: SD<CASE NUMBER>

Dear <UC EMPLOYEE>,

We are pleased to be entering into a<n Inter-Office> Memorandum of Understanding with the <UC OFFICE NAME OR INVENTOR> "NAME" for patent reimbursement for case <CASE NUMBER>, "<CASE TITLE>" ("Invention"). Please read the terms and conditions for the agreement detailed below.

The Memorandum of Understanding has the following terms and conditions:

1. NAME shall reimburse Office of Innovation and Commercialization ("OIC") for one hundred percent (100%) <, up to XXXX thousand dollars (US\$XXXX,000),> of the patent costs incurred to obtain and/or maintain patent protection for the Invention. [Past patent costs to date are approximately US\$<PATENT COSTS>.] NAME shall pay OIC within thirty (30) days of [the date of this agreement] or [receipt of invoice] the entire amount of the reimbursement. NAME may request an estimate of patent costs at any time. OIC may elect to send an estimate of patent costs to NAME at any time. NAME may elect to terminate his/her reimbursement obligations within X days of receiving such estimate and OIC shall then have no further obligation to continue prosecution or maintenance of patent rights associated with Invention. Any termination of reimbursement obligations shall not relieve NAME from any obligations accrued under this MOU prior to termination.
2. If a license or option to take a license in the Invention is entered into by and between a company and OIC and the company reimburses the University for patent costs, OIC shall reimburse to NAME the [actual patent costs paid by NAME in (1) above ] OR [patent costs<, up to XXX thousand dollars (US\$XXXX,000),>] within 30 days of receipt by OIC. This agreement shall terminate upon reimbursement by OIC of the full amount specified in Paragraph 1.



Sincerely,

Jane C. Moores, Ph.D.  
Assistant Vice Chancellor

ACCEPTED:

By: \_\_\_\_\_

Name: \_\_\_\_\_  
[Please Print]

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Charge Code: \_\_\_\_\_

Copy:     *File*