

# CREATIVE GROUP MARKETING

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FILE#: \_\_\_\_\_  
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## CONCEPT/PRODUCT DATA SHEET

NAME \_\_\_\_\_ DATE \_\_\_\_\_

COMPANY NAME (IF  
APPLICABLE) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTRY \_\_\_\_\_

TELEPHONE: HOME ( ) \_\_\_\_\_ ( ) BUSINESS \_\_\_\_\_

CITIZENSHIP \_\_\_\_\_ OCCUPATION \_\_\_\_\_

### CO-INVENTOR (IF APPLICABLE)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE: HOME ( ) \_\_\_\_\_ BUSINESS ( ) \_\_\_\_\_

NAME OF  
INVENTION \_\_\_\_\_

DATE OF  
CONCEPTION \_\_\_\_\_

I swear that I believe myself to be the original, first and sole inventor of the device herein, and that all data and statements made herein are true to the best of my knowledge.

Signature of Inventor(s): \_\_\_\_\_ Date \_\_\_\_\_

Signature of Inventor(s): \_\_\_\_\_ Date \_\_\_\_\_

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If you do not have a prototype, prepared drawings or a patent, please provide a sketch of your concept/product below. If you do have prepared sketches or photographs, please attach them to this document . Please show any special features that your idea has and also, if possible, please show various views of the idea.

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