## LEAP PRACTITIONER VERIFICATION FORM AND REQUEST FOR ORAL HEARING PARTICIPATION

On behalf of Patent Owner	Woodway USA, Inc.
Sarah E. Rieger	requests to participate in the oral hearing in
IPR2023-00836, -00843, and -00849	on its scheduled date, as noted below.

Pursuant to 28 U.S.C. § 1746, I, Sarah E. Rieger , certify that I am eligible to participate in the Legal Experience and Advancement Program (LEAP) program. I have three or fewer substantive oral hearing arguments before federal tribunals, including PTAB.

I certify/verify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Hearing Information	
Requesting Party: Woodway USA, Inc.	
Appeal/Case/Control Number: IPR2023-00836, -00843, and -00849	
Hearing Date (mm/dd/yyyy): 07/24/2024	
<b>LEAP Practitioner Contact Information</b>	
LEAP Practitioner Name: Sarah E. Rieger	
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Date: 07/16/2024 s/Sarah E. Rieger/

(Signature)

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