JOPAL SURVEY

<u>I.</u>	Contact Details	
Name:	M. LASRY	
Title: S	SUPERINTENDENT OF EXAMINERS	
Office/	Organization: ISRAEL PATENT OFFICE	
E-mail	:	
Teleph	one:	
Facsim	nile: 972-2-5316 649	
	Use of JOPAL information by your Office/Organization (Tick appropriate box)	
θ √	<u>Currently using</u> (Go to Section III) <u>Previously used but discontinued</u> (Please specify why)	
Other	database used (STN)	
		(Go to Section V)
θ	Never Used (Please specify why)	
		_ (Go to Section V)
III.	Who is using the JOPAL Information?	
θ	Own Staff	
θ	General Public	
θ	Other (Please specify)	

IV. How is the JOPAL Service used?

- 1. JOPAL updates are now available on the Internet in two forms:
 - i. As a monthly update in PDF format on WIPO's Web site (http://www.wipo.int)
 - ii. As an update to the database (JOPAL Database (http://jopal.wipo.int)
- a) <u>PDF Update Files</u> (Please complete if use is made of the JOPAL PDF update files)

inputation fitters)						
What f	What form of access do you provide to the PDF update files:					
θ Ac θ Pri	ernet cess via Local Network (by download and loading on local server) nted ner (Please specify)					
	of the Service you provide:					
	OPAL Database (Please complete if use is made of the JOPAL Database)					
	tion to the Search facilities, a BROWSE function is provided. use the BROWSE facility? Yes No					
	why not?					
Are yo	u happy with the SEARCH features/functionality provided? Yes No					
If NO,	what features would you like changed or added?					
•	i find the automatic link from the IPC Classification in the RESULTS list					
to searching in the	e PCT Database a useful feature? Yes No					
Please	comment					

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	Paper Form	CD-ROM
	•	
Pleas	se comment on why	y you still use them
3. your	What changes or a customers?	additions would increase the value of the JOPAL Service to you and
<u>V.</u>	Does your Offic	ce/Organization use other sources of Non-Patent Literature?
	Yes No	
If ve	s, please provide d	etails of the services used (see Appendix).
J	1	
VI.	If the JOPAL	Service was discontinued, what effect would this have for you
Offic	ce/Organization?	
NT		
None	9	
	2	
	2	
VII.		is
	Other comment	
	Other comment	ts y additional comments that you consider relevant to the Survey.
	Other comment	

APPENDIX

Service Name	Service Provider	Service Type: I=Internet C=CD-ROM O=Other (Specify)	Free Service Yes or No	Estimated Service Cost per month	Additional Remarks
STN	CA.S	I	N	\$200	