

07-15-1998



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To the Honorable Commissioner o

1. Name of conveying party(ies):

Sandra Anne Shaw

Aaron M. Rogers

Warner P. Bundens

Additional name(s) of conveying party(ies) attached? Yes No

3. Nature of conveyance:

- Assignment Merger
- Security Agreement Change of Name
- Other _____

Execution Date: June 18, 1998

(the attached original documents or copy thereof.)
and address of receiving party(ies):

Name: CircAid Medical Products, Inc.

Internal Address: _____

Street Address: 9323 Chesapeake Drive

Suite B-1

City: San Diego State: CA ZIP: 92123

Additional name(s) & address(es) attached? Yes No

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: _____

A. Patent Application No.(s)

09/048,573

B. Patent No.(s)

Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Harris F. Brotman, Ph.D., J.D.

Internal Address: _____

07/14/1998 JSHABAZZ 00000131 09048573

01 FC:581 40.00 OP

Street Address: 7911 Herschel Avenue

Suite 301

City: La Jolla State: CA ZIP: 92037

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 3.41) \$ 40

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number _____

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document

Harris F. Brotman, Ph.D., J.D.

Name of Person Signing

Harris F. Brotman

Signature

6/30/98

Date

Total number of pages including cover sheet, attachments, and document: 9

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

ASSIGNMENT

WHEREAS, Sandra Anne Shaw, residing at 535 C Avenue, Coronado, CA 92118; Aaron M. Rogers, residing at 301 Santa Helena, Solana Beach, CA 92075; and Warner P. Bundens, residing at 15822 Lime Grove Road, Poway, CA 92064; have made certain new and useful inventions and improvements for which they executed an application for Letters Patent of the United States entitled THERAPEUTIC COMPRESSION GARMENT and having Serial No. 09/048,573, filed March 26, 1998, in the United States Patent and Trademark Office.

AND WHEREAS, CircAid Medical Products, Inc., a corporation organized and existing under and by virtue of the laws of the State of California and having an office and place of business at 9323 Chesapeake Drive, Suite B-1, San Diego, CA 92123 is desirous of acquiring the right, title and interest in and to said inventions, improvements and application and in and to the Letters Patent to be obtained thereof;

NOW, THEREFORE, to all whom it may concern, be it known that for and in consideration of the sum of One Dollar (\$1.00) and other good and valuable considerations, the receipt and sufficiency whereof is hereby acknowledged, Sandra Anne Shaw, Aaron M. Rogers and Warner P. Bundens have sold, assigned and transferred, and by these presents do sell, assign and transfer unto said CircAid Medical Products, Inc., its successors or assigns, the entire right title and interest for all countries in and to all inventions and improvement disclosed in the aforesaid application, and in and to the said application, all divisions, continuations, or renewals thereof, all Letters Patent which may be granted therefrom, and all reissues or extensions of such patents, and in and to any and all applications which have been or shall be filed in any foreign countries for Letters Patent on the said inventions and improvements, including an assignment of all rights under the provisions of the International Convention, and all Letters Patent of foreign countries which may be granted therefrom; and Sandra Anne Shaw, Aaron M. Rogers and Warner P. Bundens do hereby authorize and request the Commissioner of Patents to issue any and all United States Patent for the aforesaid inventions and improvements to the said CircAid Medical Products, Inc. as the assignee of the entire right, title and interest in and to the same, for the use of the said CircAid Medical Products, Inc., its successors and assigns.

AND, for the consideration aforesaid, Sandra Anne Shaw, Aaron M. Rogers and Warner P. Bundens do hereby agree that Sandra Anne Shaw, Aaron M. Rogers and Warner P. Bundens, executors and legal representatives will make, execute and deliver any and all other instruments in writing including any and all further application papers, affidavits, assignments and other documents, and will communicate to said CircAid Medical Products, Inc., its successors and representatives all facts known to us relating to said improvements and the history thereof and will testify in all legal proceedings and generally do all things which may be necessary or desirable more effectually to secure to and vest in CircAid Medical Products, Inc., its successors or assigns the entire right, title and interest in and to the said improvements, inventions,

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

No. 890

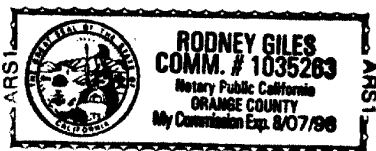
State of California

County of Orange

On June 19, 1998 before me, Rodney Giles, Notary Public
DATE NAME, TITLE OF OFFICER - E.G. "JANE DOE, NOTARY PUBLIC"

personally appeared Aaron M. Rogers
NAME(S) OF SIGNER(S)

personally known to me - OR - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/~~she~~/they executed the same in his/~~her~~/their authorized capacity(ies), and that by his/~~her~~/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

[Signature]
SIGNATURE OF NOTARY

OPTIONAL

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER

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- OTHER _____
- _____
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DESCRIPTION OF ATTACHED DOCUMENT

Assignment
TITLE OR TYPE OF DOCUMENT

2
NUMBER OF PAGES

June 19, 1998
DATE OF DOCUMENT

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

Sandra Anneshaw and Warner P. Burtina
SIGNER(S) OTHER THAN NAMED ABOVE

