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To the Honorable Commissic 10083399	2. Name and address of receiving party(ies):
Arlene Gwon	
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•	nternal Address:
Additional name(s) of conveying party(les) attached? 🖸 Yes 🞾 No	
3. Nature of conveyance:	
☐ Assignment ☐ Merger	Street Address: 2525 Dupont Drive
☐ Security Agreement ☐ Change of Na	me
☐ Other	City: <u>Irvine</u> State: <u>CA</u> ZIP: 92612
Execution Data: 7/29/1998	Additional name(s) & address(es) attached? Yes 🖾 No
4. Application number(s) or patent number(s):	
	/126,064 Filed July 30, 1998
If this document is being filed together with a new applica	tion, the execution date of the application is:
A. Patent Application No.(s)	B. Patent No.(s)
·	
Additional number	ers attached? 🗆 Yes 🕒 No
 Name and address of party to whom correspondence concerning document should be mailed: 	6. Total number of applications and patents involved: 1
 Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) 	
 Name and address of party to whom correspondence concerning document should be mailed: 	
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) Allergan, Inc.	6. Total number of applications and patents involved: 1
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) Allergan, Inc.	6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41):
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) Allergan, Inc.	6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41):
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) Allergan, Inc. Internal Address:	6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41): \$ 40.00
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5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) Allergan, Inc. Internal Address: Street Address: 2525 Dupont Drive City: Irvine State: CA ZIP: 9261	6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41): \$ 40.00 Enclosed Authorized to be charged to deposit account 8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) Allergan, Inc. Internal Address: Street Address: 2525 Dupont Drive City: Irvine State: CA ZIP: 9261 8/1998 TTON11 0000069 010885 09126064 2581 40.00 CH	6. Total number of applications and patents involved: 7. Total fee (37 CFR 3.41):
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5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert J. Baran (T2-2E) Allergan, Inc. Internal Address: Street Address: 2525 Dupont Drive City: Irvine State: CA ZIP: 9261 3/1998 TTOH11 0000069 010885 09126064 DO NOT Case Internal Address: Do Not Case Internal Address Do Not Case	6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41):

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WHEREAS, WE,	Arlene Gwo	n, 8 Tra	falgar,	Newpor	t Beach, CA 92660,
and Elizabet	h WoldeMuss	ie, 40 G	ullwing	Ave.,	Laguna Niguel, CA 9267
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of the United States, &	was filed on J	uly 30, 19	98 under	applicat	ated an application for Letters Pate tion number 09/126,064
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Irvine, Cali	fornia 9261	2, USA,	· · · · · · · · · · · · · · · · · · ·		
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SEAL

PATENT Notary Public **REEL: 9457 FRAME: 0279**

State of CALIFORNIA	
County of ORANGE	
	pefore me, Mary Lou McNown, a notary publc, NAME, TITLE OF OFFICER- E.G., "JANE DOE, NOTARY PUBLIC" RLENE GWON,
personally known to me - Oi	NAME(S) OF SIGNER(S) R - XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
MARY LOU MC NOWN COMM. # 1059394 Notary Public — Calfernia CHANGE COUNTY My Comm. Expires AUS 16	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.
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On July 29, 1998 before me,	Mary Lou McNown, a notary public, , NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"
personally appearedELIZABETH WO	LDEMUSSIE NAME(S) OF SIGNER(S)
MARY LOU MC NOWN COMM. # 1059394 Notary Public — California ORANGE COUNTY My Comm. Expires AUG 16, 1999	ved 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.
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