

12-22-1998

Tab settings

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To the Honorable Commissioner of Patents and Trademarks, attached original documents or copy thereof

## 1. Name of conveying party(ies):

Gregory F. Oxenkrug and Pura J. Requentina

Additional names(s) of conveying party(ies)

☐ Yes ☒ No3. Nature of conveyance: *MRD 12-17-88*☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Other

Execution Date: 12/1/98 and 12/3/98

## 2. Name and address of receiving party(ies):

Name: St. Elizabeth's Medical Center of Boston

Address: 736 Cambridge Street

City: Boston

State/Prov.: MA

Country: USA

ZIP: 02135

Additional name(s) &amp; address(es)

☐ Yes ☒ No

## 4. Application number(s) or registration numbers(s):

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

Patent Application No.

Filing date

B. Patent No.(s)

09/187,466

November 4, 1998

Additional numbers

☐ Yes ☒ No

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

Name: David G. Conlin

Registration No. 27,026

Address: 130 Water Street

12/22/1998 DNGUYEN 00000017 09167466

01 FC:581

40.00 OP

City: Boston

State/Prov.: MA

Country: USA

ZIP: 02109

## 6. Total number of applications and patents involved:

one

7. Total fee (37 CFR 3.41) \$ 40.00

☒ Enclosed - Any excess or insufficiency should be credited or debited to deposit account☐ Authorized to be charged to deposit account

## 8. Deposit account number:

04-1105

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## 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.

David S. Resnick (34,235)

Name of Person Signing

Signature

Date

Total number of pages including cover sheet, attachments, and

3

ASSIGNMENT

KNOW ALL MEN BY THESE PRESENTS, THAT

WHEREAS, We, Gregory F. Oxenkrug and Pura J. Requintina, residing at 100 Old Field Road, Newton 02159 and 236 Fairground Road, West Kingston, Rhode Island 02892, respectively, having invented certain improvements in METHOD FOR TREATING DEPRESSION, for which application for Letters Patent has been filed on November 4, 1998, and having a United States Serial No. 09/187,466 (the "Application") and


WHEREAS, ST. ELIZABETH'S MEDICAL CENTER OF BOSTON, a corporation duly organized under the laws of Massachusetts, and having a principal place of business at 736 Cambridge Street, Boston, Massachusetts 02135, for the benefit of itself, its successors and assigns, all inclusively hereinafter referred to as the Assignee, is desirous of acquiring the entire right, title and interest in and to said invention and to any and all Letters Patent of the United States and of all other countries which may be granted therefor; and

NOW, THEREFORE, BE IT KNOWN THAT FOR and in consideration of one dollar and other valuable considerations paid to us by the Assignee ST. ELIZABETH'S MEDICAL CENTER OF BOSTON, the receipt of which is hereby acknowledged, We do hereby sell, assign and transfer unto said Assignee, the entire right, title and interest in the United States of America and in all foreign countries in and to the said invention, and any and all improvements which are disclosed in the application and in and to said Application and all divisional, continuing, substitute, renewal, reissue and all other applications for Letters Patent which have been or shall be filed in the United States and all foreign countries on any of said improvements; and in and to all original and reissued patents which have been or shall be issued in the United States and all foreign countries on said improvements; and including all rights of priority resulting from the filing of any such applications.

We agree that said Assignee may apply for and receive Letters Patent in its own name; and that, when requested, without charge to but at the expense of said Assignee, its successors, assigns and legal representatives, to carry out in good faith the intent and purpose of this assignment, the undersigned will execute all divisional, continuing, substitute, renewal, reissue and all other patent applications on any and all said improvements; execute all rightful oaths, assignments, powers of attorney and other papers; communicate to said Assignee, its successors, assigns and legal representatives, all facts known to the undersigned relating to said improvements and the history thereof; and generally do everything possible which said Assignee, its successors, assigns, and legal representatives shall consider desirable for aiding in securing and maintaining proper patent protection for said improvements, and for vesting title to said improvements and all applications for patents and all patents

on said improvements, in said Assignee, its successors, assigns and legal representatives; and we do hereby authorize and request the Commissioner of Patents of the United States to issue such Letters Patent as shall be granted upon said U.S. application(s) to said Assignee, its successors and assigns.

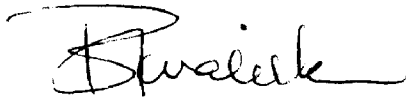
We covenant with said Assignee, its successors, assigns and legal representatives that no assignment, grant, mortgage, license or other agreements affecting the rights and property herein conveyed has been made to others by the undersigned, and that full right to convey the same as herein expressed is possessed by the undersigned.

By:   
Gregory F. Oxenkrug

Date: 12.01.98

Commonwealth of Massachusetts, ss.  
County of Suffolk, ss.

Before me this 1 day of December, 1998, personally appeared Gregory F. Oxenkrug, to me personally known to be the person who is described in and who executed the above instrument, and acknowledged to me that she executed the same of her own free will for the purpose therein set forth.




JANE BROOKS KWALICK

Notary Public

My Commission Expires July 27, 2005

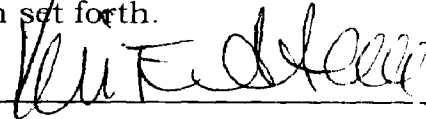
My commission expires \_\_\_\_\_

By:   
Pura J. Requintina

Date: 12/3/98

State of Rhode Island, ss.  
Commonwealth of Rhode Island, ss.  
County of Washington, ss.

Before me this 3rd day of December, 1998, personally appeared Pura J. Requintina, to me personally known to be the person who is described in and who executed the above instrument, and acknowledged to me that she executed the same of her own free will for the purpose therein set forth.



My commission expires \_\_\_\_\_

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KERIE E. STEERE

NOTARY PUBLIC

RAY TOWN REGION - 01000

6/12/2005