


FORM PTO-1619A Expires 09/30/98 OMB 0851-0027 <div style="font-size: 2em; margin-top: 10px;"> MC 3-2-99 </div>	<div style="font-size: 1.5em; margin-bottom: 10px;">03-04-1999</div>  <div style="font-size: 1.5em; margin-top: 10px;">100977508</div>	U.S. Department of Commerce Patent and Trademark Office PATENT
RECORDA		
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Conveying Party(ies) <input type="checkbox"/> Mark if additional names of conveying parties attached		
Name (line 1) <input type="text" value="BEATY, Terry Allen"/>		Execution Date Month Day Year <input type="text" value="12181998"/>
Name (line 2) <input type="text"/>		
Second Party		
Name (line 1) <input type="text" value="KUHN, Lance Scott"/>		Execution Date Month Day Year <input type="text" value="12181998"/>
Name (line 2) <input type="text"/>		
Receiving Party <input type="checkbox"/> Mark if additional names of receiving parties attached		
Name (line 1) <input type="text" value="BOEHRINGER MANNHEIM CORPORATION"/>		<input type="checkbox"/> If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)
Name (line 2) <input type="text" value="an Indiana corporation"/>		
Address (line 1) <input type="text" value="9115 Hague Road"/>		
Address (line 2) <input type="text" value="P.O. Box 50528"/>		
Address (line 3) <input type="text" value="Indianapolis"/> <input type="text" value="IN"/> <input type="text" value="46250-0528"/> <div style="font-size: 0.7em; display: flex; justify-content: space-between;"> City State/Country Zip Code </div>		
Domestic Representative Name and Address Enter for the first Receiving Party only.		
Name <input type="text"/>		
Address (line 1) <input type="text"/>		
Address (line 2) <input type="text"/>		
Address (line 3) <input type="text"/>		
Address (line 4) <input type="text"/>		

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practices. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

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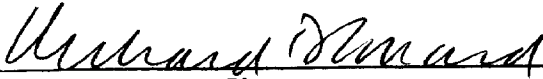
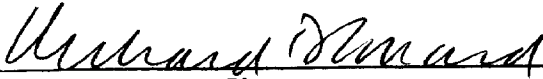
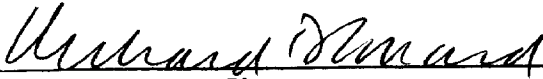
(July 1998)

PATENT
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FORM PTO-1619C <small>Expires 08/30/98 OMB 0851-0027</small>	RECORDATION FORM COVER SHEET CONTINUATION PATENTS ONLY	U.S. Department of Commerce Patent and Trademark Office PATENT																																				
Conveying Party(ies) <input type="checkbox"/> Mark if additional names of conveying parties attached																																						
Enter additional Conveying Parties		Execution Date Month Day Year																																				
Name (line 1)	SVETNIK, Vladimir	01261999																																				
Name (line 2)																																						
Name (line 1)	BURKE, David W.	Execution Date Month Day Year 12181998																																				
Name (line 2)																																						
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Name (line 2)																																						
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Enter additional Receiving Party(ies)		<input type="checkbox"/> If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)																																				
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Address (line 3)	City State/Country Zip Code																																					
Name (line 1)		<input type="checkbox"/> If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)																																				
Name (line 2)																																						
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Application Number(s) or Patent Number(s) <input type="checkbox"/> Mark if additional numbers attached																																						
Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).																																						
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th colspan="3">Patent Application Number(s)</th><th colspan="3">Patent Number(s)</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>			Patent Application Number(s)			Patent Number(s)																																
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(July 1998)

PATENT
REEL: 9788 FRAME: 0011

FORM PTO-1619B <small>Expires 08/30/99 OMB 0851-0027</small>	Page 2	U.S. Department of Commerce Patent and Trademark Office PATENT								
Correspondent Name and Address Area Code and Telephone Number (317) 236-1313										
Name Richard D. Conard, Esquire										
Address (line 1) BARNES & THORNBURG										
Address (line 2) 										
Address (line 3) 11 South Meridian Street										
Address (line 4) Indianapolis, IN 46204										
Pages	Enter the total number of pages of the attached conveyance document including any attachments. # 4									
Application Number(s) or Patent Number(s) <input type="checkbox"/> Mark if additional numbers attached										
<small>Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).</small>										
<table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center;">Patent Application Number(s)</td><td style="width: 50%; text-align: center;">Patent Number(s)</td></tr><tr><td style="border: 1px solid black; height: 20px;"></td><td style="border: 1px solid black; height: 20px;"></td></tr><tr><td style="border: 1px solid black; height: 20px;"></td><td style="border: 1px solid black; height: 20px;"></td></tr><tr><td style="border: 1px solid black; height: 20px;"></td><td style="border: 1px solid black; height: 20px;"></td></tr></table>			Patent Application Number(s)	Patent Number(s)						
Patent Application Number(s)	Patent Number(s)									
<small>If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor.</small> <table style="width: 100%;"><tr><td style="border: 1px solid black; width: 60%;"></td><td style="width: 20%; text-align: center;"><small>Month</small></td><td style="width: 20%; text-align: center;"><small>Day</small></td><td style="width: 20%; text-align: center;"><small>Year</small></td></tr></table>				<small>Month</small>	<small>Day</small>	<small>Year</small>				
	<small>Month</small>	<small>Day</small>	<small>Year</small>							
Patent Cooperation Treaty (PCT)										
<small>Enter PCT application number only if a U.S. Application Number has not been assigned.</small>										
PCT US9827203 PCT PCT 										
PCT PCT PCT 										
Number of Properties	Enter the total number of properties involved. # 1									
Fee Amount	Fee Amount for Properties Listed (37 CFR 3.41): \$ 40.00									
Method of Payment: Enclosed <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/>										
Deposit Account <small>(Enter for payment by deposit account or if additional fees can be charged to the account.)</small>										
Deposit Account Number: # 10-0435										
Authorization to charge additional fees: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
Statement and Signature										
<i>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. Charges to deposit account are authorized, as indicated herein.</i>										
<table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 30%;"><u>Richard D. Conard</u></td><td style="width: 40%; text-align: center;"><u></u></td><td style="width: 30%; text-align: right;">February 25, 1999</td></tr><tr><td style="text-align: center;">Name of Person Signing</td><td style="text-align: center;">Signature</td><td style="text-align: center;">Date</td></tr></table>			<u>Richard D. Conard</u>	<u></u>	February 25, 1999	Name of Person Signing	Signature	Date		
<u>Richard D. Conard</u>	<u></u>	February 25, 1999								
Name of Person Signing	Signature	Date								

ASSIGNMENT

In consideration of the sum of One Dollar (\$1.00) and other good and valuable consideration paid to each of the undersigned,

Name(s) of Inventor(s) **Terry Allen BEATY**,
Lance Scott KUHN,
Vladimir SVETNIK and,
David W. BURKE,

Check applicable boxes and enter serial number and date if available

maker(s) of an invention which is the subject of a ☐ United States Provisional Patent Application identified by Serial No. _____ and filing date _____, and/or ~~an~~ PCT International Application, entitled **METER**

Title of Application _____
hereinafter (the "Application(s)")

the undersigned hereby sell(s), assign(s), and set(s) over to

Name of Assignee **BOEHRINGER MANNHEIM CORPORATION**
9115 Hague Road
P.O. Box 50528
Address of principal place of business **Indianapolis, IN 46250-0528**
United States of America

Insert State of Incorporation (if applicable) or "Not Applicable" a corporation of **INDIANA**

(hereinafter designated as the Assignee) their entire right, title and interest in, to and under the Application(s), including all priority rights for the United States and other countries arising therefrom, all inventions therein disclosed, and any and all Letters Patent of the United States and of all other countries, including Canada and Mexico, which may be granted for such inventions, or any of them, all such inventions and all rights in such Application(s) and Letters Patent to be held and enjoyed by Assignee for its own use and enjoyment to the full end of the term or terms for which such Letters Patent may be granted, as fully and entirely as the same would have been held and enjoyed by them had this assignment and sale not been made.

The undersigned agree(s) to execute all papers necessary in connection with the Application(s) in the United States and counterpart applications in foreign countries and any continuing, divisional, or reissue applications thereof, and any reexamination of any of such Applications, and also to execute separate assignments in connection with such Applications as the Assignee may deem necessary or expedient.

The undersigned agree(s) to execute all papers necessary in connection with any interference which may be declared or litigation concerning the Application(s), U.S national counterparts thereof, or continuation(s), division(s), reissue(s), reexamination(s) thereof, and to cooperate with the Assignee in every way possible in obtaining evidence and going forward with such interference or litigation.

The undersigned agree(s) to execute all papers and documents and perform any act which may be necessary in connection with claims or provisions of the International Convention for Protection of Industrial Property or similar agreements.

PROVISIONAL/PCT PATENT APPLICATION
ASSIGNMENT TO BUSINESS CONCERN

The undersigned agree(s) to do all other acts which, in the opinion of Assignee, may be necessary or desirable to secure the grant of Letters Patent to Assignee or its nominees, in the United States and in all other countries where Assignee may desire to have such inventions, or any of them, patented, with specifications and claims in such form as shall be approved by Assignee and to vest and confirm in Assignee or its nominees the full and complete legal and equitable title to all such Letters Patent.

The undersigned hereby authorize(s) and request(s) the Commissioner of Patents to issue any and all Letters Patent of the United States resulting or following from said Application(s) or any division or divisions or continuing or reissue applications thereof, and any reexamination of any of such applications, to the said Assignee, as Assignee of the entire interest, and hereby covenants that the undersigned has full right to convey the interest herein assigned, and that the undersigned has not executed, and will not execute, any agreement in conflict herewith.

The undersigned hereby grant(s) the attorney of record the power to insert on this assignment any further identification which may be necessary or desirable in order to comply with the rules of the United States Patent and Trademark Office for recordation of this document.

IN WITNESS WHEREOF, I have executed this assignment at INDIANAPOLIS Indiana this 18 day of DECEMBER, 19 98.

~~Outside the USA:~~
Witnesses are
required when
acknowledgment
before a Notary
Public is not
~~feasible.~~

Witness

Witness

Terry Allen Beaty
Inventor (Signature)

Terry Allen BEATY
Inventor (Printed Name)

ACKNOWLEDGMENT

STATE OF INDIANA }

COUNTY OF }

SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal this 18th day of December, 19 98.

Rita A. Carpenter
Notary Public

Rita A. Carpenter
Printed Name

My Commission Expires:

April 8, 2001

Resident of

Putnam

County

NOTARY PUBLIC
NOTARY PUBLIC STATE OF INDIANA
PUTNAM COUNTY
MY COMMISSION EXP. APR. 8, 2001

11/98

PATENT
REEL: 9788 FRAME: 0014

IN WITNESS WHEREOF, I have executed this assignment at Indianapolis, Indiana
this 18 day of December, 19 98.

~~Outside the USA:~~

~~Witnesses are
required when
acknowledgment
before a Notary
Public is not
feasible.~~

~~Witness~~

~~Witness~~

Lance Scott Kuhn
Inventor (Signature)

Lance Scott KUHN
Inventor (Printed Name)

ACKNOWLEDGMENT

STATE OF INDIANA }

SS:

COUNTY OF }

18 Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal this
day of December, 19 98.

CHRISTINA K. TYZZER
Notary Public, State of Indiana
County of Hamilton
My Commission Expires 07/06/2008

Christina K. Tyzzer
Notary Public

Christina K Tyzzer
Printed Name

My Commission Expires: 7/6/2008 Resident of Hamilton County

IN WITNESS WHEREOF, I have executed this assignment at INDIANAPOLIS, Indiana
this 26 day of JANUARY, 19 99.

~~Outside the USA:~~

~~Witnesses are
required when
acknowledgment
before a Notary
Public is not
feasible.~~

~~Witness~~

~~Witness~~

Vladimir Svetnik
Inventor (Signature)

Vladimir SVETNIK
Inventor (Printed Name)

ACKNOWLEDGMENT

STATE OF INDIANA }

SS:

COUNTY OF MARION }

26 Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal this
day of JANUARY, 19 99.

Debra Robinson
Notary Public

DEBRA ROBINSON
Printed Name

My Commission Expires: Feb. 12, 2001 Resident of MARION County

IN WITNESS WHEREOF, I have executed this assignment at Indianapolis, Indiana
this 18th day of December, 19 98.

~~Outside the USA:~~

Witnesses are _____
required when _____
acknowledgment _____
before a Notary _____
Public is not _____
~~feasible.~~ _____
Witness _____

David W. Burke
Inventor (Signature)

David W. BURKE
Inventor (Printed Name)

ACKNOWLEDGMENT

STATE OF **INDIANA** }

COUNTY OF _____ }

SS:

18 Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal this
day of December, 19 98.

CHRISTINA K. TYZZER
Notary Public, State of Indiana
County of Hamilton
Commission Expires 07/06/2008

Christina K. Tyzzer
Notary Public

Christina K. Tyzzer
Printed Name

My Commission Expires: 7/6/2008 Resident of Hamilton County

PCT International Serial No.: PCT/US98/27203
International Filing Date: 21 December 1998