

03-04-1999



100977387

RECORDATION FORM COVER SHEET  
PATENTS ONLY

U.S. PTO  
101351  
09/25/99  
02/23/99

2-23-99

(T): The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

New

Resubmission (Non-Recordation)  
Document ID# \_\_\_\_\_

Correction of PTO Error  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

Corrective Document  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

Conveyance Type

Assignment  Security Agreement

License  Change of Name

Merger  Other \_\_\_\_\_

**U.S. Government**  
(For Use ONLY by U.S. Government Agencies)

Departmental File  Secret File

Conveying Party(ies)

Mark if additional names of conveying parties attached Execution Date  
Month Day Year

Name (line 1) Terry L. Bohannon 2/16/99

Name (line 2) \_\_\_\_\_

Second Party

Name (line 1) Lawrence W. Moser 2/16/99

Name (line 2) \_\_\_\_\_

Receiving Party

Mark if additional names of receiving parties attached

Name (line 1) Moser Medical, Inc.  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) \_\_\_\_\_

Address (line 1) 17300 El Camino Real, Suite 110

Address (line 2) \_\_\_\_\_

Address (line 3) Houston Texas 77058  
City State/Country Zip Code

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name \_\_\_\_\_

Address (line 1) \_\_\_\_\_

Address (line 2) \_\_\_\_\_

Address (line 3) \_\_\_\_\_

Address (line 4) \_\_\_\_\_

FOR OFFICE USE ONLY

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments. #

**Application Number(s) or Patent Number(s)**

Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

**Patent Application Number(s)**

**Patent Number(s)**

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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.

**Patent Cooperation Treaty (PCT)**

Enter PCT application number only if a U.S. Application Number has not been assigned.

PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>
PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>

**Number of Properties**

Enter the total number of properties involved. #

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account  (If amount is insufficient)  
Deposit Account  
(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: #

Authorization to charge additional fees: Yes  No

**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. Charges to deposit account are authorized, as indicated herein.

Clarence E. Eriksen  
Name of Person Signing

  
Signature

Feb. 23, 1999  
Date

# RECORDATION FORM COVER SHEET CONTINUATION PATENTS ONLY

U.S. P.T.  
09/256009  
02/23/99

## Conveying Party(ies)

Mark if additional names of conveying parties attached

Enter additional Conveying Parties

Name (line 1)

Execution Date  
Month Day Year

Name (line 2)

Execution Date  
Month Day Year

Name (line 1)

Name (line 2)

Execution Date  
Month Day Year

Name (line 1)

Name (line 2)

## Receiving Party(ies)

Mark if additional names of receiving parties attached

Enter additional Receiving Party(ies)

Name (line 1)

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)

Address (line 1)

Address (line 2)

Address (line 3)  City  State/Country  Zip Code

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Name (line 2)

Address (line 1)

Address (line 2)

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## Application Number(s) or Patent Number(s)

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Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

### Patent Application Number(s)

### Patent Number(s)

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## A S S I G N M E N T

FOR GOOD AND VALUABLE CONSIDERATION, the receipt, sufficiency and adequacy of which are hereby acknowledged, the undersigned, do hereby:

SELL, ASSIGN AND TRANSFER to MOSER MEDICAL, INC. (the "Assignee"), a corporation of Texas having a place of business at 17300 El Camino Real, Ste. 110, Houston, Texas 77058, the entire right, title and interest for the United States and all foreign countries, in and to any and all improvements which are disclosed in the application for United States Letters Patent, which has been executed by the undersigned concurrently herewith and is entitled *TROCAR*; such application and all divisional, continuing, substitute, renewal, reissue and all other applications for patent which have been or shall be filed in the United States and all foreign countries on any of such improvements; all original and reissued patents which have been or shall be issued in the United States and all foreign countries on such improvements; and specifically including the right to file foreign applications under the provisions of any convention or treaty and claim priority based on such application in the United States;

AUTHORIZE AND REQUEST the issuing authority to issue any and all United States and foreign patents granted on such improvements to the Assignee;

WARRANT AND COVENANT that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been or will be made to others by the undersigned, and that the full right to convey the same as herein expressed is possessed by the undersigned;

COVENANT that, when requested and at the expense of the Assignee, 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 such improvements; execute all rightful oaths, declarations, assignments, powers of attorney and other papers; communicate to the Assignee all facts known to the undersigned relating to such improvements and the history thereof; and generally do everything possible which the Assignee shall consider desirable for securing, maintaining and enforcing proper patent protection for such improvements and for vesting title to such improvements in the Assignee;

TO BE BINDING on the heirs, assigns, representatives and successors of the undersigned and extend to the successors, assigns and nominees of the Assignee.

Terry L. Bohannon  
Terry L. Bohannon

Date 02/16/1999

Lawrence W. Moser  
Lawrence W. Moser

Date 2-16-99

Peter T. O'Heeron  
Peter T. O'Heeron

Date 2-16-1999

X James Ogle  
James Ogle

Date X 2-18-1999

THE STATE OF TEXAS §

COUNTY OF HARRIS §

BEFORE ME, the undersigned authority, on this 16<sup>th</sup> day of February, 1999, personally appeared **Terry L. Bohannon**, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same of his free will for the purposes and consideration therein expressed.

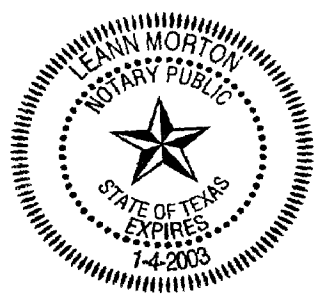


Leann Morton  
NOTARY PUBLIC, STATE OF TEXAS

THE STATE OF TEXAS §

COUNTY OF HARRIS §

BEFORE ME, the undersigned authority, on this 16<sup>th</sup> day of February, 1999, personally appeared **Lawrence W. Moser**, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same of his free will for the purposes and consideration therein expressed.



Leann Morton  
NOTARY PUBLIC, STATE OF TEXAS

THE STATE OF TEXAS §

COUNTY OF HARRIS §

BEFORE ME, the undersigned authority, on this 16<sup>th</sup> day of February, 1999, personally appeared **Peter T. O'Heeron**, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same of his free will for the purposes and consideration therein expressed.



Leann Morton  
NOTARY PUBLIC, STATE OF TEXAS

THE STATE OF MICHIGAN §

COUNTY OF MIDLAND §

BEFORE ME, the undersigned authority, on this 19 day of FEBRUARY, 1999, personally appeared **James Ogle**, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same of his free will for the purposes and consideration therein expressed.

Catherine B. Vandenberg  
NOTARY PUBLIC, STATE OF MICHIGAN

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**CATHERINE B. VANDENBERG, Notary Public  
Midland County, Michigan  
My Commission Expires March 6, 2003**