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FORM PTO-1595 1-31-92		05-06-1999		U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office	
Docket No. 240/086		RE		EET	
To the Honorable Commissioner of Patents and 1		101031267		Documents or copy thereof.	
1. Name of conveying party(ies): ANDREW BAIRD GRAI ANDREASON Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		2. Name and address of receiving party: Name: <u>COLLATERAL THERAPEUTICS</u> Street Address <u>11622 El Camino Real</u> City: <u>San Diego</u> State: <u>California</u> Zip: <u>92130</u> Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment Execution Date: <u>16 and 21 April 1999</u>					
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). <u>09/244,583</u> B. Patent No(s).: Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Sheryl R. Silverstein</u> Internal Address: <u>LYON & LYON LLP</u> <u>633 West Fifth Street, Suite 4700</u> <u>Los Angeles, CA 90071-2066</u>		6. Total number of applications and patents involved: <u>1</u> 7. Total fee (37 CFR 3.41): \$ <u>40.00</u> <input checked="" type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Charge this Deposit Account if any additional fee is required 8. Deposit Account Number: <u>12-2475</u>			
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. <u>Sheryl R. Silverstein</u> Date: <u>April 26, 1999</u> Sheryl R. Silverstein, Reg. No. 40,812 Total number of pages including cover sheet: <u>4</u> OMB No. 0651-0011 (exp. 4/94)					
Do not detach this portion Mail documents to be recorded with required cover sheet information to: Commissioner of Patents and Trademarks Box Assignments Washington, D.C. 20231 Public burden reporting for this sample cover sheet is estimated to average about 30 minutes per document to be recorded, including time for reviewing the document and gathering the data needed, and completing and reviewing the sample cover sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Office of Information Systems, PK2-1000C, Washington, D.C. 20231, and to the Office of Management and Budget, Paperwork Reduction Project, (0651-0011), Washington, D.C. 20503					

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ASSIGNMENT

For valuable consideration, we, ANDREW BAIRD of San Diego, California and a citizen of U.S.A. and GRAI ANDREASON of La Jolla, California and a citizen of U.S.A. (hereinafter referred to as "ASSIGNORS"), hereby assign to COLLATERAL THERAPEUTICS, a corporation organized and existing under and by virtue of the laws of the State of California and having its principal place of business at 11622 El Camino Real, San Diego, California 92130 and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the invention and improvements which are the subject of an application for United States Patent filed February 4, 1999, U.S. Serial No. 09/244,583, and related applications and patents, entitled NOVEL FORMS OF THE ANGIOGENIC FACTOR VASCULAR ENDOTHELIAL CELL GROWTH FACTOR: VEGF, this assignment including said application, any and all United States and foreign patents granted for any of said inventions or improvements, including all divisions, continuations, reissues, continuations-in-part and extensions thereof, and the right to claim priority based on the filing date of said application and based on the filing date of any provisional application of which said application claims the benefit under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our names or in its own name for patents and like rights of exclusion and for inventor's certificates for said inventions and improvements; and we agree for ourselves and our heirs, legal representatives and assigns, without further compensation, upon request to perform such lawful acts, to promptly provide Assignee with all pertinent facts and documents relating to said invention or application as may be known and accessible to us, to testify in any interference or litigation related to said invention or application and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this Assignment.

The Assignors hereby covenant that no assignment, sale, agreement, or encumbrance has been or will be made or entered into which would conflict with this Agreement.

WITNESS my hand at San Diego, CA
this 21 day of April, 1999.

Andrew Baird
Andrew Baird

STATE OF California)
COUNTY OF San Diego) ss

On 4-21-99 before me, GAIL PARSONS, personally appeared
Andrew Baird

☒ 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.



Gail PARSONS
Notary Public in and for said County and State

WITNESS my hand at San Diego CA
this 16 day of April, 1999.

Grai Andreason
Grai Andreason

STATE OF Calif.)
COUNTY OF SAND.) ss

On 16 APR 1999 before me, ROBERT E ANDERSON, personally appeared
Grai Andreason

☐ 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.

Robert E. Anderson
Notary Public in and for said County and State

