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FORM PTO-1595 1-31-92	U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office
To the Honorable Commissioner of Patents and Trademarks: Plea	101114275
Name of conveying party(ies):	Name and address of receiving party(ies):
Daniel A. Gamache	Name: Alcon Laboratories, Inc.
Additional name(s) of conveying party(les) attached? ☐ Yes X No	Internal Address: R&D Counsel Q-148
3. Nature of conveyance:	Street Address: 6201 South Freeway
X Assignment	City: Fort Worth State: TX ZIP: 76134-2099
☐ Security Agreement ☐ Change of Name	Additional name(s) & address(es) attached? ☐ Yes X No
☐ Other	
Execution Date: May 26, 1999	00210N/4
Application number(s) or patent number(s):	01517067
If this document is being filed together with a new application, the execu	ution date of the application is: May 27, 1999
A. Patent Application No.(s)	B. Patent No.(s)
USSN: Not Yet Assigned	
Title: THE TOPICAL USE OF KAPPA OPIOID AGONISTS TO TRE OCULAR PAIN	5 · 27 · 99
Attorney Docket No. 1592 F	5.61.11
	lai numbers attacked.
Name and address of party to whom correspondence concerning document should be mailed:	Total number of applications and patents involved: one (1)
Name: <u>Michael C. Mayo</u>	7. Total fee (37 CFR 3.41)\$ 40.00
Internal Address: R&D Counsel Q-148	
ALCON LABORATORIES, INC.	
	X Authorized to be charged to patent application
Street Address: 6201 South Freeway	8. Deposit account number:
City: Fort Worth State: TX ZIP: 76134-2	2099
City: Fort Worth State 17 211 1000	(Attach duplicate copy of this page if paying by deposit account)
	DO NOT USE THIS SPACE
9. Statement and signature. To the best of my knowledge and belief, the foregoing information is the original document. Michael C, Mayo Reg. No. 38,545 Name of Person Signing Signature. 1. **The foregoing information is the foregoing information in the foregoing information is the foregoing information in the foregoing in the foregoing in the foregoing information in the foregoing in t	strue and correct and any attached copy is a true copy of 5/2 7/97 Date Total number of pages including cover sheet
CMB No. 0651-0011 (exp. 4/94)	
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Public burden reporting for this sample cover sheet is estimated to a gathering the data needed, and completing and reviewing the sample Office of information Systems, PK2-1000C, Washington, D.C. 20231	overage about 30 minutes per document to be recorded, including time for reviewing the document and le cover sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark O 1, and to the Office of Management and Budget, Paperwork Reduction Project (0651-0011), Washing

PATENT REEL: 010149 FRAME: 0790

ASSIGNMENT

WHEREAS I am the below named sole inventor of the invention entitled:

"THE TOPICAL USE OF KAPPA OPIOID AGONISTS TO TREAT OCULAR PAIN" and described in a United States Patent Application filed with the United States Patent and Trademark Office on May 27, 1999, and further identified by Attorney Docket No. 1592 F; and

WHEREAS, ALCON LABORATORIES, INC., a company organized under the laws of Delaware and having a place of business at 6201 South Freeway, Fort Worth, Texas, 76134-2099, 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 foreign countries which may be obtained therefor;

NOW, THEREFORE, for good and valuable consideration, I do hereby sell, assign and transfer to ALCON LABORATORIES, INC., its legal representatives, successors, and assigns, the entire right, title and interest in and to said invention as set forth in the above-mentioned application, and in and to any and all patents of the United States and foreign countries which may be issued for said invention;

UPON SAID CONSIDERATIONS, I hereby agree that I will not execute any writing or do any act whatsoever conflicting with these presents, and that I will, at any time upon request, without further or additional consideration but at the expense of said assignee, execute such additional assignments and other writings and do such additional acts as said assignee may deem necessary or desirable to perfect the assignee's enjoyment of this grant and render all necessary assistance in making application for and obtaining original, divisional, continuation-in-part, reexamined, reissued, or other Letters Patent of the United States or of any and all foreign countries on said invention and in enforcing any rights in action accruing as a result of such applications or patents, said assistance to include my cooperation in all prosecution associated with obtaining such applications or patents and my provision of testimony in any proceedings or transactions involving such applications or patents, it being understood that the

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PATENT REEL: 010149 FRAME: 0791 foregoing covenant and agreement shall bind, and insure to the benefit of, the assigns and legal representatives of assignor and assignee.

AND I request the Commissioner of Patents and Trademarks to issue any Letters Patent of the United States which may be issued for said invention to said ALCON LABORATORIES, INC., its legal representatives, successors or assigns, as the sole owner of the entire right, title and interest in said patent and the invention covered thereby.

Full name of joint inventor:	Daniel A. Gamache
Address:	5610 Hunterwood Lane
	Arlington, Texas 76017
Inventor's signature:	Gall a. Lala
Date:	May 26, 1999

STATE OF TEXAS §
COUNTY OF TARRANT §

On this day of , 1999, before me personally appeared DANIEL A. GAMACHE to me known to be the person named in and who executed the above instrument, and acknowledged to me that he executed the same for the uses and purposes therein set forth.

Notary Public

BARBARA McKENZIE

Notary Public

STATE OF TEXAS

My Comm. Exp. 10/30/2001

CERTIFICATE OF MAILING BY EXPRESS MAIL

I hereby certify that this correspondence is being deposited with sufficient postage to the United States Postal Service as "Express Mail," Mailing Label No. EL 008 174 400 US in an envelope addressed to: Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

	May 27, 1999
	Date
·.	Barbara McKenzie
	Name
Bon	Dan McKenzie
	Signature