

FORM PTO-1619A  
Expires 06/30/99  
OMB 0651-0027

10-25-1999



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U.S. Department of Commerce  
Patent and Trademark Office  
PATENT

10/12/99  
10/12/99  
09/415749  
JCS25 U.S. PTO

RECORDATION FORM COVER SHEET  
PATENTS ONLY

TO: 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**  
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Departmental File  Secret File

Conveying Party(ies)

Mark if additional names of conveying parties attached

Name (line 1)  Execution Date Month Day Year

Name (line 2)

Second Party

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Name (line 2)

Receiving Party

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Name (line 1)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)     
City State/Country Zip Code

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.)

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

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Address (line 4)

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Mail documents to be recorded with required cover sheet(s) information to  
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10/12/99 0000056 09415749 40.00 00

PATENT

REEL: 010320 FRAME: 0130

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

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**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)**

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

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. Month Day Year

**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

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.)

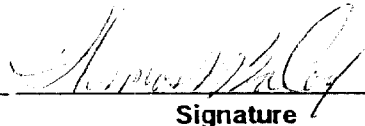
Deposit Account Number: #

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.

Thomas S. Baker, Jr.



12 October 1999

Name of Person Signing

Signature

Date

RECORDATION FORM COVER SHEET  
CONTINUATION  
PATENTS ONLY

PTO  
09/415749  
U.S.

10/12/99

Conveying Party(ies)

Mark if additional names of conveying parties attached

Enter additional Conveying Parties

Name (line 1) Robert L. Richards

Execution Date  
Month Day Year  
09 29 1999

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)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3) City State/Country Zip Code

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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)

Grid for Patent Application Number(s) with 5 rows and 3 columns of input boxes.

Grid for Patent Number(s) with 5 rows and 3 columns of input boxes.

**ASSIGNMENT**  
**FOR GOOD AND VALUABLE CONSIDERATION**

I, (we) Bruce V. Weeks  
Richard Arthur  
Robert L. Richards

residing respectively at (city and state or country)  
12998 Worthington Road, N.W., Pataskala, Ohio 43062  
1236 Riker Drive, New Albany, Ohio 43054  
8090 Grossgate Court S., Dublin, Ohio 43017

do hereby sell, assign and transfer unto Advanced Cutting Technologies, Ltd.  
a corporation organized under the laws of Ohio  
and having an office at 41 Israel Street, Westerville, Ohio 43081

herein sometimes called "ASSIGNEE" the entire right, title and interest, together with all rights of priority, in and to my (our) invention for the IMPROVEMENT IN BOILER TUBE FLARED-END COMPRESSION TOOL

as described and/or claimed in my (our) application for Letters Patent of the United States of America, Attorney Docket No. ACT003, filed on even date and as described and/or claimed in any and all applications for Letters Patent based thereon including divisions, continuations and reissues thereof as well as all foreign counterparts thereof together with all Letters Patent issuing on any of the aforesaid applications for Letters Patent, the same to be held and enjoyed by ASSIGNEE, its successors, assigns or other legal representatives, to the full ends of the terms of all said Letters Patent therefore which may be granted.

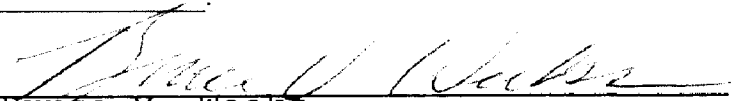
AND I (WE) HEREBY AUTHORIZE ASSIGNEE to make applications for and to receive Letters Patent for said invention in any foreign countries in its own name, or in my (our) name, at its election.


AND I (WE) HEREBY COVENANTR AND AGREE that I (we) will execute or procure any further necessary assurance of title to said invention and any Letters Patent which may issue therefore and that I (we) will, at any time, upon the request and at the expense of ASSIGNEE deliver any testimony in any legal proceedings and execute all papers that may be necessary or desirable to perfect the title to said invention or any

Letters Patent which may be granted therefore in ASSIGNEE, its successors, assigns, or other legal representatives, and that I (we) will, at any time, upon the request and at the expense of ASSIGNEE execute any continuations, divisions, reissues, or any other additional applications for Letters Patent for said invention or any part or parts thereof, all of which applications and any Letters Patent issuing thereon are hereby assigned to ASSIGNEE, and will make all rightful oaths, and do all lawful acts requisite for procuring the same herein without further compensation, but at the expense of ASSIGNEE, its successors, assigns or other legal representatives.

AND I (WE) HEREBY AUTHORIZE AND REQUEST the Commissioner of Patents and Trademarks to issue any and all Letters Patent of the United States for said inventions, resulting from any of the aforesaid applications to said as sole assignee.

WITNESS MY (OUR) hand(s) and seal(s) this \_\_\_\_\_ day of

  
Bruce V. Weeks

  
Richard Arthur

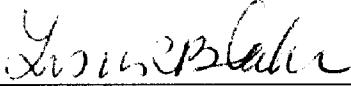
  
Robert L. Richards

**ACKNOWLEDGMENT**

State of OHIO )  
County of Franklin )SS

On this 23rd day of September, 1999, personally appeared before me Bruce V. Weeks, to me known, and known by me to be the same person(s) described in and who executed the foregoing instrument, and acknowledge(s) that he (or she) (they) executed the same, of his (or her) (their) own free will and for the purposes set forth.



  
LISA R. BLAKE  
Notary Public, State of Ohio  
My Commission Expires 5-1-2000  
Notary Public or Consular  
Office of the United  
States of America

**ACKNOWLEDGMENT**

State of OHIO )  
County of Franklin )SS

On this 23rd day of September,  
19 99, personally appeared before me Richard Arthur  
\_\_\_\_\_, to me known, and known by me to be  
the same person(s) described in and who executed the foregoing instrument, and  
acknowledge(s) that he (or she) (they) executed the same, of his (or her) (their) own free  
will and for the purposes set forth.



LISA R. BLAKE  
Notary Public, State of Ohio  
My Commission Expires 5-1-2000 Lisa R. Blake  
\_\_\_\_\_  
Notary Public or Consular  
Office of the United  
States of America

**ACKNOWLEDGMENT**

State of OHIO )  
County of Franklin )SS

On this 29th day of September,  
19 99, personally appeared before me Robert L. Richards  
\_\_\_\_\_, to me known, and known by me to be  
the same person(s) described in and who executed the foregoing instrument, and  
acknowledge(s) that he (or she) (they) executed the same, of his (or her) (their) own free  
will and for the purposes set forth.



LISA R. BLAKE  
Notary Public, State of Ohio  
My Commission Expires 5-1-2000 Lisa R. Blake  
\_\_\_\_\_  
Notary Public or Consular  
Office of the United  
States of America