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MIND 11/8/44 RE	U.S. Department of Commerce
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	ease record the attached original documents or copy thereof.
Name of conveying party(ies):	2. Name and address of receiving party(ies)
Steven L. Olson, David Swanson and Russell B Chompson	Name SCIMED Life Systems, Inc.
Additional name of conveying party attached? YesXXNo	Internal Address:
8. Nature of conveyance:	Street Address: One SCIMED Place
_x_AssignmentMerger	
Security Agreement Change of Name	City: <u>Maple Grove</u> State <u>Minnesota</u> ZIP <u>55311</u>
Execution Dates: September 30, 1999	Additional name(s) and address(es) attached? Yes XX No
Application number(s) or patent numbers:	
	B. Patent No.(s)
• •	ned? <u>Yes XXX No</u> g 6. Total number of applications and
Additional numbers attach 5. Name and address party to whom correspondence concerning locument should be mailed: Name Craig A. Slavin	ned? Yes _XXX_No
5. Name and address party to whom correspondence concerning locument should be mailed:	ned? Yes XXX No g 6. Total number of applications and patents involved: <u>1</u>
<ul> <li>Name and address party to whom correspondence concerning locument should be mailed:</li> <li>Name Craig A. Slavin</li> </ul>	ned?Yes <u>XXX No</u> g 6. Total number of applications and
<ul> <li>Name and address party to whom correspondence concerning locument should be mailed:</li> <li>Name Craig A. Slavin</li> <li>Internal Address: Suite 200</li> </ul>	med?       Yes       XXX       No         g       6.       Total number of applications and patents involved:       1         7.       Total fee (37 CFR 3.41)       \$40.00         X       Enclosed
<ul> <li>Name and address party to whom correspondence concerning locument should be mailed:</li> <li>Name_Craig A. Slavin</li> <li>Internal Address: Suite 200</li> <li>Street Address_840 Apollo Street</li> </ul>	ned?       Yes       XXX_No         g       6. Total number of applications and patents involved:       _1         7. Total fee (37 CFR 3.41)       \$40.00         X       Enclosed         X       Any discrepancy or overpayment is authorized to charged to deposit account
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Name and address party to whom correspondence concerning         locument should be mailed:         Name_Craig A. Slavin         Internal Address: Suite 200         Street Address_840 Apollo Street         City: El Segundo       State CA       ZIP 90245	med?       Yes       XXX       No         g       6.       Total number of applications and patents involved:       _1         7.       Total fee (37 CFR 3.41)       \$40.00         X       Enclosed
Name and address party to whom correspondence concerning         locument should be mailed:         Name_Craig A. Slavin         Internal Address:         Street Address:         Street Address         840 Apollo Street         City:       El Segundo         State       CA         ZIP       90245         2/1999       DNGUYEN         00000257       09378060         C:581       40.00 OP	ned?       Yes XXX No         g       6. Total number of applications and patents involved:       _1         7. Total fee (37 CFR 3.41)       \$40.00         X       Enclosed         X       Any discrepancy or overpayment is authorized to charged to deposit account         8. Deposit Account number:       _50-0638         (Attach duplicate copy of this page if paying by deposit account)
Name and address party to whom correspondence concerning         locument should be mailed:         Name_Craig A. Slavin         Internal Address: Suite 200         Street Address         Street Address         840 Apollo Street         City: El Segundo         State CA         ZIP 90245         P         Statement and signature.	med?       Yes XXX No         g       6. Total number of applications and patents involved:
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Name and address party to whom correspondence concerning locument should be mailed:         Name_Craig A. Slavin         Internal Address: Suite 200         Street Address_840 Apollo Street         City: El Segundo       State CA         ZIP 90245         2/1999 DHGUYEN       00000257 09378060         Little Ca       ZIP 90245         DO NOT US         9. Statement and signature.         To the best of my knowledge and belief, the foregoing inform	ned?       Yes XXX No         g       6. Total number of applications and patents involved:       _1         7. Total fee (37 CFR 3.41)       \$40.00         X       Enclosed         X       Any discrepancy or overpayment is authorized to charged to deposit account         8. Deposit Account number:       _50-0638         (Attach duplicate copy of this page if paying by deposit account)

PATENT REEL: 010372 FRAME: 0361

### ASSIGNMENT

WHEREAS, we, Steven L. Olson, residing at 107 S. Mary Ave., #118, Sunnyvale, California 94086, Sidney D. Fleischman, residing at 855 Woodland Avenue, Menlo Park, California 94025, David W. Swanson, residing at 877 Heatherstone Way, Apt. 705, Mountain View, California 94040, and Russell B. Thompson, residing at 123 West Portola Avenue, Los Altos, California 94022, the ASSIGNORS herein, have invented improvements in new and useful **RESILIENT RADIOPAQUE ELECTROPHYSIOLOGY ELECTRODES AND PROBES INCLUDING THE SAME**, and a U.S. Patent Application directed thereto was filed on August 20, 1999 under U.S. application Serial No. 09/378,060; and

WHEREAS, SCIMED Life Systems, Inc., a corporation having a principle place of business at One SCIMED Place, Maple Grove, Minnesota, the ASSIGNEE herein, desires to acquire the entire right, title and interest in and to said inventions, applications and Letters Patent to be granted and issued thereon;

NOW, THEREFORE, for and in consideration of the sum of One Dollar (\$1.00) by the ASSIGNEE to me paid, and other valuable consideration, the receipt and legal sufficiency of all of which is hereby acknowledged, I, the said ASSIGNOR, have sold and do hereby sell, assign, transfer and set over unto said ASSIGNEE, its successors and assigns, the entire right, title and interest in and to said inventions and all improvements thereon, in and to said application for Letters Patent thereon, in and to applications pertaining to or based upon said inventions and applications, including divisional and continuing applications and continuations-in-part, and in and to any and all Letters Patent which may be granted and issued on said inventions and applications, or any of them, not only for, to and in the United States of America, its territories and possessions, but for, to and in all countries foreign thereto, together with and including all priority rights based upon any and all applications in the United States of America covered by this Assignment.

And for the above-named considerations, we do hereby agree that we will, at the request of said ASSIGNEE, execute any and all applications for Letters Patent for said inventions and any and all other papers and documents and do all other and further lawful acts that said ASSIGNEE may deem necessary or desirable to obtain Letters Patent on said inventions, to secure the grant of such Letters Patent and to perfect and vest in the ASSIGNEE the entire right, title and interest in the inventions, applications and Letters Patent.

The undersigned hereby authorizes the firm of HENRICKS, SLAVIN & HOLMES LLP to correct errors in this assignment or to insert any further identification or other information necessary or desirable to make this assignment suitable for recordal in the United States Patent Office.

And for the above-named considerations, the undersigned do hereby authorize and empower the ASSIGNEE, its successors and assigns, to apply for and obtain, in its or their own names, Letters Patent for the said inventions before competent International Authorities and in any and all countries

PATENT REEL: 010372 FRAME: 0362 foreign to the United States in which applications for Letters Patent can be so made or Letters Patent so obtained.

Dated 09-30-29	Steven L. Olson

## NOTARIAL CERTIFICATE

State of California )
County of \_\_\_\_\_)

On \_\_\_\_\_\_ before me, a notary public, personally appeared Steven L. Olson personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument, the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

SEAL

Notary Public

Dated

Sidney D. Fleischman

# NOTARIAL CERTIFICATE

State of California

)
County of \_\_\_\_\_)

On \_\_\_\_\_\_\_\_ before me, a notary public, personally appeared Sidney D. Fleischman personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument, the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

SEAL

Notary Public

PATENT REEL: 010372 FRAME: 0363

Docket No. 15916-257 Page 3

Dated 9-30-99

Caris K. S warn

David K. Swansor

### NOTARIAL CERTIFICATE

State of California

County of \_\_\_\_\_)

On \_\_\_\_\_\_ before me, a notary public, personally appeared David K. Swanson personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument, the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

SEAL

Notary Public

Dated \_\_\_\_\_\_

Russell 37	fm
Russell B. Thomps	on

### NOTARIAL CERTIFICATE

State of California	)
	)
County of	)

On \_\_\_\_\_\_\_ before me, a notary public, personally appeared Russell B. Thompson personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument, the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

SEAL

Notary Public

PATENT REEL: 010372 FRAME: 0364

**RECORDED: 11/08/1999**