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U.S. DEPARTMENT OF COMMERCE  
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12-06-1999



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Date 09 November, 1999

Signature

*Simone K. Hoops*

To the Honorable Commissioner of Patents and Trademarks. Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Cesare Mondadori  
Stephen M. Sorensen  
Janice M. Hitchcock

2. Name and address of receiving party(ies):

Name: **Hoechst Marion Roussel, Inc.**  
Internal Address: **P. O. Box 6800**  
Street Address: **Route 202/206**  
City: **Bridgewater** State **NJ** ZIP: **08807-0800**

Additional name(s) of conveying party(ies) attached? ☐ YES ☒ NO

Additional name(s) and address(es) attached? ☐ YES ☒ NO

3. Nature of Conveyance:

☒ Assignment ☐ Merge  
☐ Security Agreement ☐ Change of Name  
☐ Other

Execution Date: **November 3, 1999 and November 4, 1999**

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): **09/382,932**

B. Patent No. (s):

Additional numbers attached? ☐ YES ☒ NO

5. Name and address of party to whom correspondence concerning document should be mailed

Name: **Carolyn D. Moon, Reg. No. 33,022**  
Internal Address: **Hoechst Marion Roussel, Inc.**  
Street Address: **Route 202-206 / P.O. Box 6800**  
City: **Bridgewater** State **NJ** ZIP: **08807-0800**

Our Reference No.: **M015540 US**

6. Total number of applications and patents involved: **one (1)**

7. Total (37 CFR 3.41): **\$40.00**

☐ Enclosed  
☒ Authorized to be charged to deposit account

8. Deposit account number: **13-2764**

(Attach duplicate copy of this page if paying by deposit account)

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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.

Charlotte Barney, Reg. No. 35,060  
Name of Person Signing

*Charlotte Barney*  
Signature

Date: 4 November, 1999

Total number of pages comprising cover sheet: **1**

OMB No. 0651-0011 (exp. 4/94)

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PATENT  
REEL: 010411 FRAME: 0201

**ASSIGNMENT  
(with Priority Rights)  
and  
INVENTORSHIP DECLARATION**

I do hereby claim and declare that I am/we are the sole, true and first inventor(s) of an invention relating to and entitled:

Title of Invention **The use of R (+)- $\alpha$ -(2,3-Dimethoxyphenyl)-1-[2-(4-fluorophenyl)ethyl]-4-piperidinemethanol for the Treatment of Sleep Disorders**

A-signee which invention was made by me/us out of and in the course of my/our employment with Hoechst Marion Roussel, Inc. (hereinafter referred to as the "Assignee").

I/we acknowledge that I/we hold the invention and all patent and other rights and powers obtainable or exercisable in respect thereof in trust for the Assignee.

As trustee(s), and in consideration of the remuneration for my/our work, effective as of 25 August 1999 I/we do hereby declare, sell, assign, and transfer unto Assignee my/our entire right, title and interest throughout the world, in and to the invention and all rights and powers to make applications for Letters Patent in its own name, or in the name of its nominee, and all rights and powers to file any reissue, divisional, continuing or substitute application and any corresponding applications in any and all countries, including all right to claim priority under all international Conventions and Treaties in the name of said Assignee, and do hereby authorize said Assignee to insert here the  
Instant Application Number 09/382,932 and Filing Date 25 August 1999

in the United States of America  
of the application on which the priority will be based (Case No. M01554O); and in and to any Letters Patent that may be issued for said invention in any and all countries; and I/we do hereby agree to assist said Assignee in the prosecution of the said applications and in any interference, conflict, opposition or litigation which may arise involving said invention or the patent or patents thereon, and to execute any reissue, divisional, continuing or substitute application and assent to their making any applications in other countries corresponding to the above and below specifically identified application(s) as may be requested by said assignee, and I/we do hereby authorize said Assignee to insert here the  
Corresponding Application No. \_\_\_\_\_ and Filing Date \_\_\_\_\_

Date, Country \_\_\_\_\_  
in \_\_\_\_\_  
of the corresponding application in any country where that patent property must be entered for recordal of this Assignment; and I/we do hereby authorize and request that any such Letters Patent be issued to said Assignee in accordance herewith, and consent to the recordal of this Assignment being under covenant, not only that I/we have full power to make the same, but also that such assignment rights are not encumbered by any grant, license, or other right heretofore given.

Additional Names and Signatures attached.  
Subscribed and Sworn by me/us

1. Full Name: Cesare Mondadori  
Signature: [Signature]  
Date: 11/3/99  
Country of Citizenship: Switzerland  
Residence: Basking Ridge, New Jersey  
(City and State/City and Country only)  
P. O. Address: 44 Hartley Lane  
Basking Ridge, New Jersey 07920

3. Full Name: Janice M. Hitchcock  
Signature: [Signature]  
Date: 11/4/99  
Country of Citizenship: United States of America  
Residence: Neshanic Station, New Jersey  
(City and State/City and Country only)  
P. O. Address: 712 Whitenack Court  
Neshanic Station, New Jersey 08853

2. Full Name: Stephen Sorensen  
Signature: [Signature]  
Date: 11/3/99  
Country of Citizenship: United States of America  
Residence: Chester, New Jersey  
(City and State/City and Country only)  
P. O. Address: 33 Chester Woods Drive  
Chester, New Jersey 07930

4. Full Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_  
Residence: \_\_\_\_\_  
(City and State/City and Country only)

5. Full Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_  
Residence: \_\_\_\_\_  
(City and State/City and Country only)  
P. O. Address: \_\_\_\_\_

6. Full Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_  
Residence: \_\_\_\_\_  
(City and State/City and Country only)  
P. O. Address: \_\_\_\_\_

Attach Notarial Certificate (Individual)

# NOTARIAL CERTIFICATE (Individual)

UNITED STATES OF AMERICA     )  
STATE OF NEW JERSEY         ) ss.  
COUNTY OF SOMERSET         )

On this 24<sup>th</sup> day of November, 1999, personally appeared before me,

**Cesare Mondadori**

known or identified to me to be the individual(s) described in and who executed the foregoing document

## **ASSIGNMENT (with Priority Rights) and INVENTORSHIP DECLARATION**

and acknowledged the same as a free act and deed for uses and purposes therein expressed.

SEAL

  
\_\_\_\_\_  
Notary Public

Susanne K. Stinger  
Notary Public, State of New Jersey  
My Commission Expires June 14, 2000

Notary Signature  
Print or Type Name  
of Notary, Expiration  
Date, if any, Title or  
Jurisdiction Area

# NOTARIAL CERTIFICATE (Individual)

UNITED STATES OF AMERICA     )  
STATE OF NEW JERSEY         ) ss.  
COUNTY OF SOMERSET         )

On this 24<sup>th</sup> day of November, 1999, personally appeared before me,

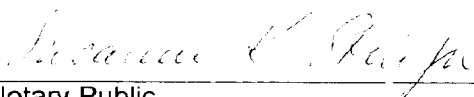
**Stephen Sorensen**

known or identified to me to be the individual(s) described in and who executed the foregoing document

## **ASSIGNMENT (with Priority Rights) and INVENTORSHIP DECLARATION**

and acknowledged the same as a free act and deed for uses and purposes therein expressed.

SEAL

  
\_\_\_\_\_  
Notary Public

Susanne K. Stinger  
Notary Public, State of New Jersey  
My Commission Expires June 14, 2000

Notary Signature  
Print or Type Name  
of Notary, Expiration  
Date, if any, Title or  
Jurisdiction Area

# NOTARIAL CERTIFICATE (Individual)

UNITED STATES OF AMERICA     )  
STATE OF NEW JERSEY         ) ss.  
COUNTY of SOMERSET         )

On this 11<sup>th</sup> day of November, 1999, personally appeared before me,

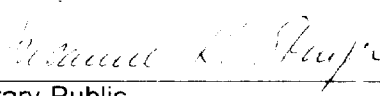
**Janice M. Hitchcock**

known or identified to me to be the individual(s) described in and who executed the foregoing document

## **ASSIGNMENT (with Priority Rights) and INVENTORSHIP DECLARATION**

and acknowledged the same as a free act and deed for uses and purposes therein expressed.

SEAL

  
\_\_\_\_\_  
Notary Public

**Susanne K. Stinger**  
Notary Public, State of New Jersey  
My Commission Expires **June 14, 2000**

Notary Signature  
Print or Type Name  
of Notary, Expiration  
Date, if any, Title or  
Jurisdiction Area