

FORM PTO-1619A
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OMB 0651-0027

12-28-1999

U.S. Department of Commerce
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PATENT



101232643

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- ☒ Assignment ☐ Security Agreement
☐ License ☐ Change of Name
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Conveying Party(ies)

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Name (line 1) **HEATHER McCOMB**

Execution Date
Month Day Year
120199

Name (line 2)

Second Party

Name (line 1)

Execution Date
Month Day Year

Name (line 2)

Receiving Party

☐ Mark if additional names of receiving parties attached

Name (line 1) **HARBEN, INC.**

Name (line 2) **A Corporation of the State of Michigan**

Address (line 1) **36720 Suffolk Drive**

Address (line 2)

Address (line 3) **Clinton Township**

MI

48035

City State/County Zip Code

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Name

Address (line 1)

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Address (line 4)

12/28/1999 INVENT 00000037 29112691

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PATENT

REEL: 010464 FRAME: 0019

Correspondent Name and Address

Area Code and Telephone Number **828-252-6225**

Name **Steven C. Schnedler**

Address (line 1) **Carter & Schnedler, P.A.**

Address (line 2) **56 Central Avenue, Suite 103**

Address (line 3) **P.O. Box 2985**

Address (line 4) **Asheville, NC 28802**

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

1

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)

29112691

Patent Number(s)

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

PCT

PCT

PCT

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PCT

Number of Properties

Enter the total number of properties involved.

1

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41): \$ **40.00**

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.

Steven C. Schnedler

Name of Person Signing

Signature

12/7/99

Date

PATENT
REEL: 010454 FRAME: 0020

ASSIGNMENT

In consideration of the sum of One Dollar and other good and valuable consideration, of which I acknowledge receipt, I, HEATHER McCOMB of Santa Rosa Beach, Florida, sell and assign to HARBEN, INC., a corporation of the State of Michigan, having a business address at 36720 Suffolk, Clinton Township, Michigan 48035 (hereinafter Assignee), its successors and assigns, my entire right, title and interest in and to the improvements in SEAT BELT LAP PILLOW AND POSITIONER FOR USE BY PREGNANT WOMEN, invented by me, as described in United States design patent application Ser. No. 29/112,691, filed October 21, 1999, and any and all applications for patent and patents therefor in any and all countries, including all divisions, reissues, continuations and extensions thereof, and all rights of priority resulting from the filing of said United States patent application, and authorize and request any official whose duty it is to issue patents, to issue any patent on said improvements or resulting therefrom to said Assignee, or its successors or assigns, and agree that on request and without further consideration, but at the expense of said Assignee I will communicate to said Assignee or its representative or nominees any facts known to me respecting said improvements and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths and generally do everything possible to aid said Assignee, its successors, assigns, and nominees to obtain and enforce proper patent protection for said improvements in all countries.

Date: 1 December, 99

Heather McComb
HEATHER McCOMB

STATE OF FLORIDA)

COUNTY OF Walton)

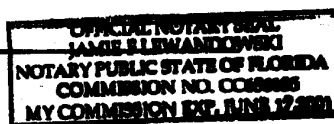
ss:

This 1st day of December, 1999,
before me personally came the above-named HEATHER McCOMB to me personally known as the individual who executed the foregoing assignment, who acknowledged to me that she executed the same of her own free will for the purposes therein set forth.

James F. D. [Signature]
NOTARY PUBLIC

My Commission Expires: _____

(SEAL)

**PATENT****RECORDED: 12/13/1999****REEL: 010454 FRAME: 0021**