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ocket No.: 12065

D/No Fee

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

1. Name of conveying party(ies):  
**Craig W. Arends, Lonnie R. Seymour, Robert Lam**

Additional names(s) of conveying party(ies)  Yes  No

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

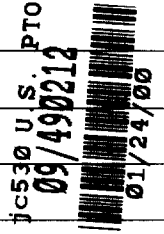
Name: **Illinois Tool Works Inc.**

Internal Address: **3600 West Lake Avenue**  
**Glenview, Illinois 60025**

Street Address: **3600 West Lake Avenue**

City: **Glenview** State: **IL** ZIP: **60025**

Additional name(s) & address(es) attached?  Yes  No



3. Nature of conveyance:

Assignment  Merger  
 Security Agreement  Change of Name  
 Other \_\_\_\_\_

Execution Date: **January 20, 2000 and January 21, 2000**

4. Application number(s) or registration numbers(s):

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

A. Patent Application No.(s)  
**09490212**

Additional numbers attached?  Yes  No

B. Patent No.(s)

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

Name: **Mark W. Croll**

Internal Address: **Illinois Tool Works Inc.**  
**3600 West Lake Avenue**  
**Glenview, Illinois 60025**

Street Address: **3600 West Lake Avenue**

City: **Glenview** State: **IL** ZIP: **60025**

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

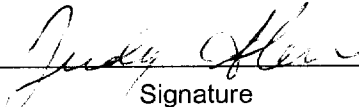
7. Total fee (37 CFR 3.41):.....\$ **(40.00)**

Enclosed - Any excess or insufficiency should be credited or debited to deposit account  
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8. Deposit account number:  
**020025**

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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.*

**Judy Stein**  **January 24, 2000**

Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments, and document: **3**



