

FORM PTO-1619A

Expires 06/30/99
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03-09-2000



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PATENT

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☐ Departmental File ☐ Secret File

Conveying Party(ies)

☐ Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name (line 1) Troncom Corporation 11/01/99

Name (line 2)

Second Party

Execution Date
Month Day Year

Name (line 1)

Name (line 2)

Receiving Party

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Name (line 1) Troncom Acquisition Corporation

Name (line 2)

Address (line 1) c/o Mason Wells Leveraged Buyout Fund I, L.P.

Address (line 2) 770 North Water Street

Address (line 3) Milwaukee Wisconsin 53202

City State/Country Zip Code

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PATENT

REEL: 010590 FRAME: 0055

Correspondent Name and Address

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Pages

Enter the total number of pages of the attached conveyance document
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3

Application Number(s) or Patent Number(s)

☐

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Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

08149390

08996547

08929019

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

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has not been assigned.

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Number of Properties

Enter the total number of properties involved.

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Fee Amount

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

120.00

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Enclosed ☐Deposit Account ☒

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17-0055

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indicated herein.

Marta S. Levine

Name of Person Signing



Signature

January 28, 2000p

Date