



07-31-2000



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Tab settings

To the Honorable Commissioner of Patents and Trademarks, please return the attached original documents or copy thereof.

1. Name of conveying party(ies):
Judd A. Lord

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

2. Name and address of receiving party(ies):
Name: Masco Corporation of Indiana
Internal Address: _____

3. Nature of conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other _____
Execution Date: August 6, 1998

Street Address: 55 East 111th St.
City: Indianapolis State: IN ZIP: 46280
Additional name(s) & address(es) attached? Yes No

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)
29/092,720
Additional numbers attached? Yes No

B. Patent No.(s)

5. Name and address of party to whom correspondence concerning document should be mailed:
Name: Myron B. Kapustij
Internal Address: Legal Department
Masco Corporation
Street Address: 21001 Van Born Road
City: Taylor State: MI ZIP: 48180

6. Total number of applications and patents involved: **ONE**
7. Total fee (37 CFR 3.41):.....\$ 40.00 E
 Enclosed - Any excess or insufficiency should be credited or debited to deposit account
 Authorized to be charged to deposit account
8. Deposit account number:
13-1981

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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.

Myron B. Kapustij, Reg. No. 26,748

Myron B. Kapustij

7-8-00

Name of Person Signing

Signature

Date

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

3

