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Name of conveying party(ies):	2. Name and ad	ldress of re	eceiving party(ies):	
Martin PUSCH (4/12/00) Dave REYNOLDS (4/14/00) 7-26-00 7-26-00	Verwaltur Max-Naede D-37115 I	ock nedische Industrie Besitz- und sungs-Kommanditgesellschaft eder-Strasse 15 5 Duderstadt 5 REPUBLIC OF GERMANY		
Additional conveying party(ies) NO 3. Nature of conveyance: ASSIGNMENT	-			
Execution Date: Same as above	Additional name	(s) & addre	ess(es) attached? NO	
 Application number(s) or patent number(s): 				
If this is being filed together with a new application, th	e execution date o	f the applic	cation is:	
A. Patent Application Number(s):	B. Pater	nt Numberi	(s):	
09/550,022				
Additional numb	ers attached? NO			
 Name and address of party to whom correspondence 			tions/patents involved: 1	
concerning document should be mailed:				
Richard L. Schwaab FOLEY & LARDNER	7. Total fee (37 C.F.R. § 3.41): \$40.00 X Check Enclosed			
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U.S. Rights-Sole of Joint

ASSIGNMENT

For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, each undersigned inventor has sold and assigned, and by these presents hereby sells and assigns, unto

name and address of assignee

Otto Bock Orthopaedische Industrie Besitz-und Verwaltungs-Kommanditgesellschaft Max-Naeder-Strusse 15 D-37115 Dudersladt Federal Republic of Germany

(hereinafter ASSIGNEE) all right, title and interest for the United States, its territories and possessions in and to this invention relating to

title of invention

METHOD OF MEASURING A BODY REGION

as set forth in this United States Patent Application

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	Serial No.	09/550,022	Filed	April	14,	2000

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NAMES AND SIGNATURES OF INVENTORS				
Name: Martin PUSCH	Signature deartin Pusch	Date: 12.04.00		
Name: Dave REYNOLDS	Signature:	Date:		
Name:	Signature:	Date:		
Name:	Signature:	Date:		
Name:	Signature:	Date:		
NAMES AND SIGNATURES OF WITNESSES				
Name: KARIN STOLLBERG	Signature: Komin Stollbary	Date: 12.04.00		
Name:	Signature:	Date:		

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For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, each undersigned inventor has sold and assigned, and by these presents hereby sells and assigns, unto

name and address of assignee Otto Bock Orthopaedische Industrie Besitz-und Verwaltungs-Kommanditgesellschaft Max-Naeder-Strasse 15 D-37115 Duderstadt Federal Republic of Germany

(hereinafter ASSIGNEE) all right, title and interest for the United States, its territories and possessions in and to this invention relating to

title of invention

METHOD OF MEASURING A BODY REGION

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in and to said United States Patent Application including any and all divisions or continuations thereof and in and to any and all Letters Patent of the United States which may issue on any such application or for said invention, including any and all reissues or extensions thereof, to be held and enjoyed by said ASSIGNEE, its successors, legal representatives and assigns to the full end of the term or terms for which any and all such Letters Patent may be granted as fully and entirely as would have been held and enjoyed by the undersigned had this Assignment not been made;

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Each of the undersigned further covenants and agrees he will communicate to said ASSIGNEE, its successors, legal representatives or assigns all information known to him relating to said invention or patent application and that he will execute and deliver any papers, make all rightful oaths, testify in any legal proceedings and perform all other lawful acts deemed necessary or desirable by said ASSIGNEE, its successors, legal representatives or assigns to perfect title to said invention, to said application including divisions and continuations thereof and to any and all Letters Patent which may be granted therefor or thereon, including reissues or extensions, in said ASSIGNEE, its successors, legal representatives or assigns in obtaining, reissuing or enforcing Letters Patent of the United States for said invention;

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NAMES AND SIGNATURES OF INVENTORS				
Name: Martin PUSCH	Signature.	Date:		
Name: Dave REYNOLDS	Signature: Danalagrades	Date: 14.4.00		
Name:	Signanire:	Date:		
Name:	Signature:	Date:		
Name:	Signature:	Date:		
NAMES AND SIGNATURES OF WITNESSES				
Name:	Signature:	Date:		
Name: COUN ASHLEY	Signature: C. A. Wey	Date: 144.00		

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