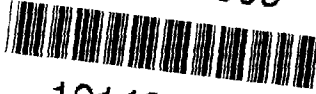


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attached original documents or copy thereof.

To the Honorable Commissioner of Patents and Trademarks

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: _____

Street Address: 55 East 111th St.

City: Indianapolis State: IN ZIP: 46280

3. Nature of conveyance:

- Assignment Merger
- Security Agreement Change of Name
- Other _____

Execution Date: January 27, 2000

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)

29/117,792

B. Patent No.(s)

Additional numbers attached? Yes No

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

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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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
Signature

8-30-00
Date

Name of Person Signing

3

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

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