

11-07-2000



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TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

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Conveyance Type

New

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Document ID#

Correction of PTO Error
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Assignment Security Agreement

License Change of Name

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Name (line 1)

Execution Date
Month Day Year

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If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

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PATENT

REEL: 011199 FRAME: 0736

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Pages Enter the total number of pages of the attached conveyance document including any attachments. #

Application Number(s) or Patent Number(s) Mark if additional numbers attached

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

Patent Application Number(s)

Patent Number(s)

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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 only if a U.S. Application Number has not been assigned.
PCT PCT PCT
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Number of Properties Enter the total number of properties involved. #

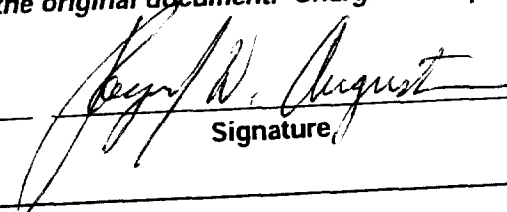
Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed Deposit Account
Deposit Account
(Enter for payment by deposit account or if additional fees can be charged to the account.)
Deposit Account Number: #
Authorization to charge additional fees: Yes No

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. Charges to deposit account are authorized, as indicated herein.

RAYMOND W. AUGUSTIN
Name of Person Signing


Signature

October 17, 2000
Date

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Month Day Year

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Execution Date
Month Day Year

Name (line 1)

Name (line 2)

Execution Date
Month Day Year

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Name (line 2)

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State/Country

Zip Code

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Patent Application Number(s)

Patent Number(s)

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Sole or joint

USA Patent Appln

Atty Dkt#: OSTEONIC-304
For Inventions
made outside USA

ASSIGNMENT

In consideration of the sum of One Dollar (\$ 1.00) and other good and valuable consideration paid to each of the undersigned, to wit:

Insert Name(s)
of Inventor(s)

- (1) CLOIX Erick (6) _____
- (2) _____ (7) _____
- (3) _____ (8) _____
- (4) _____ (9) _____
- (5) _____ (10) _____

Insert names of Assignees
and addresses

- 1) DIMSO (DISTRIBUTION MEDICALE DU SUD-OUEST)
ZI de Marticot - 33610 Castas / France
- 2) ELBERG Jean-François
7 rue d'Hélopolis - 75017 Paris / France

Title of invention

(hereinafter designated "ASSIGNEES") the entire right, title and interest for the United States of America as defined in 35 U.S.C. 100, in the invention known as
INTERSPINOUS STABILIZER TO BE FIXED TO SPINOUS PROCESSES OF TWO

VERTEBRAE

For which an application for Letters Patent of the United States of America:

- (a) has been executed by the undersigned on
- (b) has been filed on 27 January 1999 as PCT/FR99/00154
and assigned Serial No.

and the undersigned hereby authorize(s) and request(s) the United States Commissioner of Patents and Trademark to issue said Letters Patent to the said ASSIGNEES, for their interest as ASSIGNEES, their successors, assigns and legal representatives; the undersigned agree(s) that the attorneys of record in said application shall hereafter act on behalf of said ASSIGNEES;



AND the undersigned hereby agree(s) to transfer a like interest, upon request of the said ASSIGNEES, their successors, assigns and legal representatives, and without further remuneration, in and to any and all divisions, continuations, substitutes, and reissues thereof; and to testify and execute any papers for ASSIGNEES, their successors, assigns and legal representatives, deemed essential by ASSIGNEES to ASSIGNEES' full protection and title in and to the invention hereby transferred.

Signed on the date(s) indicated beside my/our signature(s)

INVENTOR(S)
concurrently with application

DATE SIGNED

WITNESS(ES)

- 1) Name CLOIX Erick  Sept. 21, 2000
September 21, 2000 
- 2) Name _____
- 3) Name _____
- 4) Name _____