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Robert GEILENKIRCHEN, Hubert VERELST,
Dirk DE CONINCK, Paul WYNEN

2. Name and address of receiving party(ies):

Name: ROBERT BOSCH GMBH

Address: WERNERSTRASSE 1

Additional names(s) of conveying party(ies):

Yes No

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Execution Date: AUG. 21, SEP. 9, NOV. 11, 2000

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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:

Patent Application No.	Filing date
09/601,851	08/09/00

B. Patent No.(s)

Additional numbers

Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: MICHAEL J. STRIKER
Registration No. 27233
Address: 103 EAST NECK ROAD

6. Total number of applications and patents involved:

1

7. Total fee (37 CFR 3.41):.....\$ 40.00

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In consideration of value received, I, having a residence and post office address as stated below next to my name, the sole inventor (if only one name is listed below), or a joint inventor (if plural inventors are listed below), of an invention described in an application for a United States Patent entitled:

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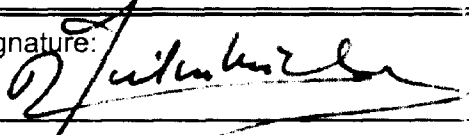

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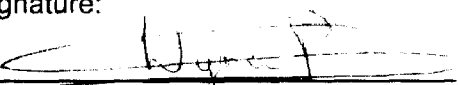
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Signature: 	Date: 21/08/00	Residence and Full Postal Address: Rue du Cimetiere 51 4624 Fleron (Liege) Belgium
Full Name of First or Sole Inventor: Robert GEILENKIRCHEN	Witness:	
Signature: 	Date: 29/08/00	Residence and Full Postal Address: Groot Overlaer 245 3300 Tienen Belgium
Full Name of Second Inventor: Hubert VERELST	Witness:	
Signature: 	Date: 02/11/00	Residence and Full Postal Address: Sneppelaar 115 1840 Londerzeel Belgium
Full Name of Third Inventor: Dirk DE CONINCK	Witness:	

Signature: 	Date: 4/13/00	Residence and Full Postal Address: Keunenlaan 36 3930 Hamont Germany Belgium <i>3930 NEFFIT</i>
Full Name of Fourth Inventor: Paul WYNEN	Witness:	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Fifth Inventor:	Witness:	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Sixth Inventor:	Witness:	
Signature:	Date:	Residence and Full Postal Address:
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