

FORM PTO-1619A  
Expires 06/30/99  
OMB 0651-0027

03-09-2001

U.S. Department of Commerce  
Patent and Trademark Office  
**PATENT**



101630939

**RECORDATION FORM COVER SHEET  
PATENTS ONLY**

2.28.01

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

**Submission Type**

☐ New

☒ Resubmission (Non-Recordation)  
Document ID#

☐ Correction of PTO Error  
Reel #  Frame #

☐ Corrective Document  
Reel #  Frame #

**Conveyance Type**

☒ Assignment ☐ Security Agreement

☐ License ☐ Change of Name

☐ Merger ☐ Other

**U.S. Government**  
(For Use ONLY by U.S. Government Agencies)

☐ Departmental File ☐ Secret File

**Conveying Party(ies)**

☒ Mark if additional names of conveying parties attached

Name (line 1)  Execution Date Month Day Year

**Second Party**

Name (line 1)  Execution Date Month Day Year

Name (line 2)

**Receiving Party**

☐ Mark if additional names of receiving parties attached

Name (line 1)  ☐ 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.)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)

City State/Country Zip Code

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

03/08/2001 DBYRNE 00000250 09632430

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Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231  
**PATENT**

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FORM PTO-1619B  
Expires 06/30/99  
OMB 0651-0027

Page 2

U.S. Department of Commerce  
Patent and Trademark Office  
**PATENT****Correspondent Name and Address**Area Code and Telephone Number Name Address (line 1) Address (line 2) Address (line 3) Address (line 4) **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)

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 PCT PCT PCT **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

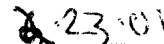
☒

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.

David L. McCombs



Name of Person Signing

Signature

Date

FORM PTO-1619C  
Expires 06/30/99  
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# RECORDATION FORM COVER SHEET CONTINUATION PATENTS ONLY

U.S. Department of Commerce  
Patent and Trademark Office  
**PATENT**

## Conveying Party(ies)

☐ Mark if additional names of conveying parties attached

Enter additional Conveying Parties

Name (line 1) Albert Davis

Execution Date  
Month Day Year

02/02/01

Name (line 2)

Execution Date  
Month Day Year

Name (line 1) Charles R. Keyes, Jr.

01/24/01

Name (line 2)

Execution Date  
Month Day Year

Name (line 1) Clyde Baker

01/31/01

Name (line 2)

## Receiving Party(ies)

☐ Mark if additional names of receiving parties attached

Enter additional Receiving Party(ies)

Name (line 1)

☐ 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.)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

Name (line 1)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

☐ 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.)

## 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)



## ASSIGNMENT

WHEREAS, WE,

- 1) Danny Carpenter Rogers of Athens  
State of Texas;
- 2) Samuel Lynn Austin of Eustace  
State of Texas;
- 3) Albert Davis of Richardson  
State of Texas;
- 4) Charles R. Keyes, Jr. of Athens  
State of Texas; and
- 5) Clyde Baker of South Jordan  
State of Utah;

have invented certain improvements in

### DEVICE AND METHOD FOR ISOLATING A SURFACE OF A BEATING HEART DURING SURGERY

and filed a United States patent application as Serial No. 09/632,430 on August 4, 2000;

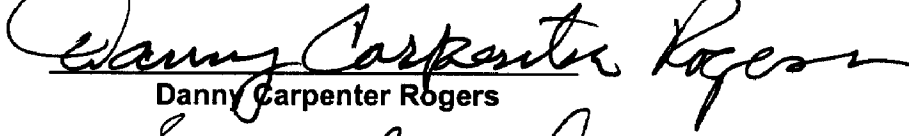
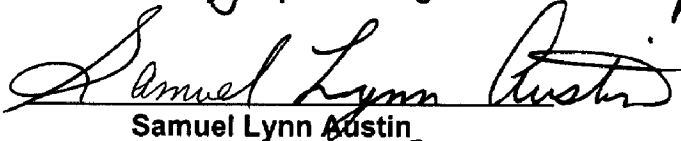
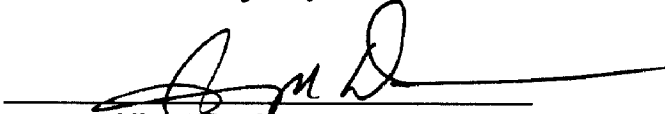
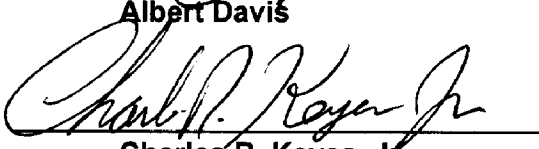
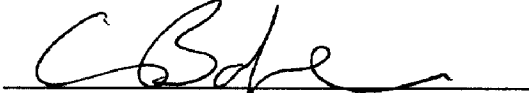
WHEREAS, CHASE MEDICAL, LP, a Delaware limited partnership having a place of business at 1876 Firman Drive, Richardson, Texas 75081, (hereinafter called CHASE MEDICAL), desires to acquire the entire right, title and interest in the application and invention, and to any United States and foreign patents to be obtained therefor;

NOW, THEREFORE, for a valuable consideration, receipt whereof is hereby acknowledged, we, the above named, hereby acknowledge our prior existing obligation and hereby sell, assign, and transfer to CHASE MEDICAL its successors and assigns, the entire right, title, and interest in the application and invention therein disclosed for the United States and foreign countries, to and under the said improvements, and the said application and all divisionals, renewals, continuing applications thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all rights of priority under International Conventions and applications for Letters Patent which may hereafter be filed for said improvements in any country or countries foreign to the United States, and all Letters Patent which may be granted for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and we request the Commissioner of Patents to issue any Letters Patent granted upon the invention set forth in the application to CHASE MEDICAL its successors and assigns; and we hereby agree that CHASE MEDICAL may apply for foreign Letters Patent on the invention and we will execute all papers necessary in connection with the United States and foreign applications when called upon to do so by CHASE MEDICAL.

Signed:


DATE

SIGNATURE

- 1) 24 JAN '01   
Danny Carpenter Rogers
- 2) Jan. 24, 2001   
Samuel Lynn Austin
- 3) Feb 2 2001   
Albert Davis
- 4) JAN. 24, 01   
Charles R. Keyes, Jr.
- 5) 1-31-01   
Clyde Baker

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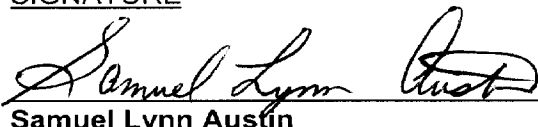
Signed and sealed:

	<u>LOCATION</u>	<u>DATE</u>	<u>SIGNATURE</u>
1)	_____	_____	 Danny Carpenter Rogers
	State of <u>TEXAS</u> )		
	County of <u>HENDERSON</u> )		

On this \_\_\_\_\_ day of \_\_\_\_\_, 2000, before me personally came **Danny Carpenter Rogers** to me personally known, and known to me to be the person described in and who executed the foregoing assignment, and acknowledged to me that the execution of the same was a free act and deed.

Printed Name of Notary _____	Signature of Notary _____
<input type="checkbox"/> Personally Known	<input type="checkbox"/> Produced Identification in the form of _____


Signed and sealed:

	<u>LOCATION</u>	<u>DATE</u>	<u>SIGNATURE</u>
2)	_____	_____	 Samuel Lynn Austin
	State of _____ )		
	County of _____ )		

On this \_\_\_\_\_ day of \_\_\_\_\_, 2000, before me personally came **Samuel Lynn Austin** to me personally known, and known to me to be the person described in and who executed the foregoing assignment, and acknowledged to me that the execution of the same was a free act and deed.

Printed Name of Notary _____	Signature of Notary _____
<input type="checkbox"/> Personally Known	<input type="checkbox"/> Produced Identification in the form of _____

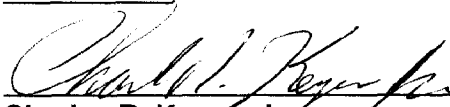
Signed and sealed:

	<u>LOCATION</u>	<u>DATE</u>	<u>SIGNATURE</u>
3)	_____	_____	 Albert Davis
	State of _____ )		
	County of _____ )		

On this \_\_\_\_\_ day of \_\_\_\_\_, 2000, before me personally came **Albert Davis** to me personally known, and known to me to be the person described in and who executed the foregoing assignment, and acknowledged to me that the execution of the same was a free act and deed.

Printed Name of Notary _____	Signature of Notary _____
<input type="checkbox"/> Personally Known	<input type="checkbox"/> Produced Identification in the form of _____

Signed and sealed:

	<u>LOCATION</u>	<u>DATE</u>	<u>SIGNATURE</u>
4)	_____	_____	 Charles R. Keyes, Jr.
	State of _____ )		
	County of _____ )		

On this \_\_\_\_\_ day of \_\_\_\_\_, 2000, before me personally came **Charles R. Keyes, Jr.** to me personally known, and known to me to be the person described in and who executed the foregoing assignment, and acknowledged to me that the execution of the same was a free act and deed.

Printed Name of Notary _____	Signature of Notary _____
<input type="checkbox"/> Personally Known	<input type="checkbox"/> Produced Identification in the form of _____

Signed and sealed:

LOCATION

DATE

SIGNATURE

5)

\_\_\_\_\_

  
Clyde Baker

State of \_\_\_\_\_ )  
ss.:

County of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 2000, before me personally came **Clyde Baker** to me personally known, and known to me to be the person described in and who executed the foregoing assignment, and acknowledged to me that the execution of the same was a free act and deed.

\_\_\_\_\_  
Printed Name of Notary

\_\_\_\_\_  
Signature of Notary

☐ Personally Known

☐ Produced Identification in the form of \_\_\_\_\_

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