

OIPF  
APR 19 2001

## RECORDATION FORM COVER SHEET

PATENTS ONLY

04-30-2001



101693658

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original document or copy thereof.

## 1. Name(s) of conveying party(ies):

- 1) JON M. BISHAY
- 2) PAUL C. LEONARD
- 3) JAY M. MIAZGA
- 4)
- 5)
- 6)

Additional names of conveying parties attached? ☐ Yes ☒ No

## 3. Nature of conveyance:

- ☒ Assignment ☐ Merger  
☐ Security Agreement ☐ Change of Name  
☐ Other \_\_\_\_\_

## Execution Dates:

- 1) APRIL 2, 2001 4) \_\_\_\_\_
- 2) MARCH 26, 2001 5) \_\_\_\_\_
- 3) APRIL 2, 2001 6) \_\_\_\_\_

## 2. Name and address of receiving party:

Name: VERTIS NEUROSCIENCE, INC.

Internal Address: \_\_\_\_\_

Street Address: 2101 FOURTH AVENUESUITE 2000City SEATTLE State WAZip: 98121Additional names & addresses attached? ☐ Yes ☒ No

## 4. Application number(s) or registration number(s):

If this document is being filed together with a new application,  
the execution date of the application is \_\_\_\_\_.A. Patent Application No(s).  
09/751,382

B. Patent No(s).

Additional numbers attached? ☐ Yes ☒ No

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

Name: PERKINS COIE LLPInternal Address: PATENT-SEAJohn M. WechkinStreet Address: P.O. Box 1247City: SEATTLE State: WA ZIP: 98111-1247

## 6. Total number of applications and patents involved \_\_\_\_\_

1

## 7. Total Fee (37 CFR 3.41): \_\_\_\_\_

\$40

☐ Enclosed☒ Authorized to be charged to deposit account8. Deposit account number: 50-0665

DO NOT USE THIS SPACE

## 9. 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.

JOHN M. WECHKIN

Name of Person Signing

Signature

Date

April 16, 2001Total number of pages including cover sheet, attachments, and document: 4

## ASSIGNMENT

WHEREAS, we, Jon M. Bishay, Paul C. Leonard, and Jay M. Miazga ("ASSIGNORS"), having post office addresses of 16017 NE 169<sup>th</sup> Place, Woodinville, WA 98072; 22132 NE 133<sup>rd</sup> Street, Woodinville, WA 98072; and 6025 McKinley Pl. N, Seattle, WA 98103, respectively, are the joint inventors of an invention entitled "APPARATUS AND METHOD FOR COUPLING THERAPEUTIC AND/OR MONITORING EQUIPMENT TO A PATIENT," as described and claimed in the specification for which a continuation-in-part application for United States letters patent was filed on December 29, 2000 and assigned Application No. 09/751,382; this application is a continuation-in-part of U.S. Application No. 09/452,477, filed December 1, 1999, and U.S. Application No. 09/666,931, filed September 21, 2000, both of which are pending.;

WHEREAS, Vertis Neuroscience, Inc. ("ASSIGNEE"), a corporation of the State of Washington having a place of business at 2101 Fourth Avenue, Suite 200, Seattle, WA 98121, is desirous of acquiring the entire right, title, and interest in and to the invention and in and to any patents that may be granted therefor in the United States and in any and all foreign countries;

NOW, THEREFORE, in exchange for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, ASSIGNORS hereby sell, assign, and transfer unto ASSIGNEE, its legal representatives, successors, and assigns, the entire right, title and interest in and to the invention as set forth in the above-mentioned application, including any continuations, continuations-in-part, divisions, reissues, re-examinations, or extensions thereof, any other inventions described in the application, and any and all patents of the United States of America and all foreign countries that may be issued for the invention, including the right to file foreign applications directly in the name of ASSIGNEE and to claim priority rights deriving from the United States application to which foreign applications are entitled by virtue of international convention, treaty or otherwise, the invention, application and all patents on

the invention to be held and enjoyed by ASSIGNEE and its successors and assigns for their use and benefit and of their successors and assigns as fully and entirely as the same would have been held and enjoyed by ASSIGNORS had this assignment, transfer, and sale not been made.

UPON THE ABOVE-STATED CONSIDERATIONS, ASSIGNORS agree to not execute any writing or do any act whatsoever conflicting with this assignment, and at any time upon request, without further or additional consideration but at the expense of ASSIGNEE, execute all instruments and documents and do such additional acts as ASSIGNEE may deem necessary or desirable to perfect ASSIGNEE's enjoyment of this grant, and render all necessary assistance required for the making and prosecution of applications for United States and foreign patents on the invention, for litigation regarding the patents, or for the purpose of protecting title to the invention or patents therefor.

ASSIGNORS authorize and request the Commissioner of Patents and Trademarks to issue any Patent of the United States that may be issued for the invention to ASSIGNEE.

4/2/01  
Date \_\_\_\_\_  
State of WASHINGTON )  
County of KING )

Jon M. Bishay  
Jon M. Bishay  
ss.

I certify that I know or have satisfactory evidence that Jon M. Bishay is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated April 2, 2001  
Signature of Notary Public Charlene M. Anderson  
Printed Name CHARLENE M. ANDERSON  
My appointment expires 7-15-03

March 26, 2001  
Date  
State of Washington  
County of King

Paul C. Leonard  
Paul C. Leonard  
ss.

I certify that I know or have satisfactory evidence that Paul C. Leonard is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated April 2, 2001  
Signature of Notary Public Charlene M. Anderson  
Printed Name CHARLENE M. ANDERSON  
My appointment expires 7-15-03

4/2/01  
Date  
State of WASHINGTON  
County of KING

Jay M. Miazga  
Jay M. Miazga  
ss.

I certify that I know or have satisfactory evidence that Jay M. Miazga is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated April 2, 2001  
Signature of Notary Public Charlene M. Anderson  
Printed Name CHARLENE M. ANDERSON  
My appointment expires 7-15-03