

05-16-2001



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

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

5-10-01

**RECORDATION FORM COVER SHEET
PATENTS ONLY**

Attorney Docket No. 16869B016500.

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

Submission Type

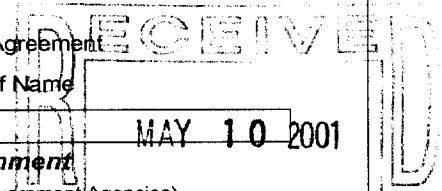
- New
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Document ID # _____
- Correction of PTO Error
Reel # _____ Frame # _____
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Conveyance Type

- Assignment
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- Merger
- Security Agreement
- Change of Name
- Other _____
- Departmental File
- Secret File

U.S. Government

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Mark if additional names of conveying parties attached

Name (line 1) Akira Yamamoto

Execution Date
Month Day Year
05 03 2001

Name (line 2) _____

Second Party

Name (line 1) _____

Execution Date
Month Day Year

Name (line 2) _____

Receiving Party

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Name (line 1) Hitachi, Ltd.

Name (line 2) _____

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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Address (line 2) 4-Chome, Chiyoda-Ku

Address (line 3) Tokyo

Japan

101-8010

City

State/Country

Zip Code

Domestic Representative Name and Address

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Name _____

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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)		
<input type="text" value="09/829,470"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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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 <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>
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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

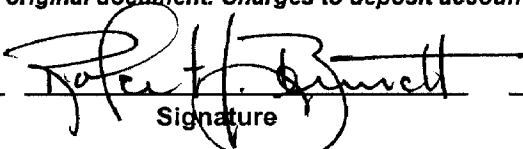
Deposit Account Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: #

Authorization to charge additional fees: Yes No

Statement and Signature

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Robert J. Bennett, Reg. No. 27,533  5/7/01
Name of Person Signing Signature Date

**RECORDATION FORM COVER SHEET
CONTINUATION
PATENTS ONLY**

Conveying Party(ies)

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Name (line 1)

Execution Date
Month Day Year

Name (line 2)

Execution Date
Month Day Year

Name (line 1)

Name (line 2)

Execution Date
Month Day Year

Name (line 1)

Name (line 2)

Receiving Party(ies)

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Name (line 1)

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Patent Application Number(s)

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