

FORM PTO-1615A 0 4 2001  
Expires 08/30/99  
OMB 0651-0027

06-08-2001

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



101742443

**RECORDATION FORM COVER SHEET  
PATENTS ONLY**

NAK-049-USA-PCT

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)

Toshihiro Noguchi

Execution Date  
Month Day Year  
3 1 01

Name (line 2)

**Second Party**

Name (line 1)

Shoji Yokota

Execution Date  
Month Day Year  
3 1 01

Name (line 2)

**Receiving Party**

☒

Mark if additional names of receiving parties attached

Name (line 1)

Sumitomo Metal Mining Co., Ltd.

☒

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)

11-3, Shimbashi 5-chome

Address (line 2)

Minato-ku

Address (line 3)

Tokyo

Japan

Zip Code

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Donald E. Townsend

Address (line 1)

Law Offices of Townsend & Banta

Address (line 2)

1225 Eye St., N.W.

Address (line 3)

Suite 500

Address (line 4)

Washington, D.C. 20005

06/07/2001 DBYRNE 00000007 09363611

01 FC:361

40.00 00

**FOR OFFICE USE ONLY**

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

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

**PATENT**  
**REEL: 011859 FRAME: 0769**

**Correspondent Name and Address**

Area Code and Telephone Number **202-682-4727**

Name **Donald E. Townsend**

Address (line 1) **Law Offices of Townsend & Banta**

Address (line 2) **1225 Eye St., N.W.**

Address (line 3) **Suite 500**

Address (line 4) **Washington, D.C. 20005**

**Pages**

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

# **4**

**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)**

**09/763611**

**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

PCT

PCT

PCT

only if a U.S. Application Number has not been assigned.

PCT

PCT

PCT

**Number of Properties**

Enter the total number of properties involved.

# **1**

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41): \$ **40**

Method of Payment:  
Deposit Account

Enclosed ☒

Deposit Account ☐

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

Deposit Account Number:

# **20-1424**

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.*

**Donald E. Townsend, Jr.**

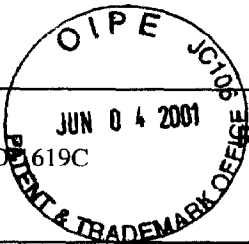
*Donald E. Townsend, Jr.*

**June 4, 2001**

Name of Person Signing

Signature

Date



FORM PTO 619C  
Expires 06/30/99  
OMB 0651-0027

**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) Kazuo Koike

Execution Date  
Month Day Year  
3 6 00

Name (line 2)

Name (line 1) Yasufumi Hisasue

Execution Date  
Month Day Year  
3 5 01

Name (line 2)

Name (line 1)

Execution Date  
Month Day Year

Name (line 2)

**Receiving Party(ies)**

☐ Mark if additional names of receiving parties attached

Enter additional Receiving Party(ies)

Name (line 1) Kioke Medical Co., Ltd.

☒ 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) 24-8, Matsushima 1-chome

Address (line 2) Edoqawa-ku

Address (line 3) Tokyo

Japan

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

NAK-049-USA-PCT

WHEREAS I/We, the below named inventor(s), [hereinafter referred to as Assignor(s)], have made an invention entitled:

MEDICAL MEASUREMENT APPARATUS

(Title of Invention)

for which I/We executed an application for United States Letters Patent concurrently herewith or filed an application for United States Letters Patent on March 1, 2001, (Serial No. 09/763,611); and

WHEREAS, SUMITOMO METAL MINING CO., LTD.

(Full Name of Assignee)

a corporation of Japan

(Country of Incorporation)

whose post office address is 11-3, Shimbashi 5-chome, Minato-ku, Tokyo, Japan

(hereinafter referred to as Assignee), is desirous of securing the entire right, title, and interest in and to this invention, the application for United States Letters Patent on this invention and the Letters Patent to be issued upon this application;

NOW THEREFORE, be it known that, for good and valuable consideration the receipt of which from assignee is hereby acknowledged, I/We, as assignor(s), have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto the assignee, its lawful successors and assigns, my/our entire right, title, and interest in and to this invention and this application, and all divisions, and continuations thereof, and all Letters Patent of the United States which may be granted thereon, and all reissues thereof; and I/We hereby authorize and request the Commissioner of Patents and Trademarks of the United States to issue all Letters Patent for this invention to assignee, its successors and assigns, in accordance with the terms of this Assignment;

AND, I/WE HEREBY further covenant and agree that I/We will, without further consideration, communicate with assignee, its successors and assigns, any facts known to me/us respecting this invention and testify in any legal proceeding, sign all lawful papers when called upon to do so, execute and deliver all papers that may be necessary or desirable to perfect the title to this invention in said assignee, its successors and assigns, execute all divisional, continuation, and reissue applications, make all rightful oaths and generally do everything possible to aid assignee, its successors and assigns, to obtain and enforce proper patent protection for this invention in the United States, it being understood that any expense incident to the execution of such papers shall be borne by the assignee, its successors and assigns.

IN TESTIMONY WHEREOF, I/We have hereunto set our hand(s).

1. FULL NAME OF SOLE OR FIRST ASSIGNOR TOSHIHIRO NOGUCHI	ASSIGNOR'S SIGNATURE <i>Toshihiro Noguchi</i>	DATE <i>March 1, 2001</i>
ADDRESS c/o SUMITOMO METAL MINING CO., LTD. 19-2, Dateshita, Aza, Ohdate-shi, Akita-ken, Japan		CITIZENSHIP Japan
2. FULL NAME OF SECOND ASSIGNOR, IF ANY SHOJI YOKOTA	ASSIGNOR'S SIGNATURE <i>Shoji Yokota</i>	DATE <i>March 1, 2001</i>
ADDRESS c/o SUMITOMO METAL MINING CO., LTD. 19-2, Dateshita, Aza, Ohdate-shi, Akita-ken, Japan		CITIZENSHIP Japan
3. FULL NAME OF THIRD ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS		CITIZENSHIP
4. FULL NAME OF FOURTH ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS		CITIZENSHIP
5. FULL NAME OF FIFTH ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS		CITIZENSHIP
6. FULL NAME OF SIXTH ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS		CITIZENSHIP

LAW OFFICES OF TOWNSEND &amp; BANTA • WASHINGTON, D.C.

**ASSIGNMENT**

NAK-049-USA-PCT

WHEREAS I/We, the below named inventor(s), [hereinafter referred to as Assignor(s)], have made an invention entitled:  
**MEDICAL MEASUREMENT APPARATUS**

(Title of Invention)

for which I/We executed an application for United States Letters Patent concurrently herewith or filed an application for  
United States Letters Patent on March 1, 2001 (Serial No. 09/763,611); andWHEREAS, KOIKE MEDICAL CO., LTD.

(Full Name of Assignee)

a corporation of Japan


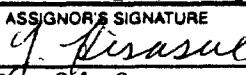
(Country of Incorporation)

whose post office address is 24-8, Matsushima 1-chome, Edogawa-ku, Tokyo, Japan(hereinafter referred to as Assignee), is desirous of securing the entire right, title, and interest in and to this invention, the  
application for United States Letters Patent on this invention and the Letters Patent to be issued upon this application;

NOW THEREFORE, be it known that, for good and valuable consideration the receipt of which from assignee is hereby  
acknowledged, I/We, as assignor(s), have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set  
over unto the assignee, its lawful successors and assigns, my/our entire right, title, and interest in and to this invention and  
this application, and all divisions, and continuations thereof, and all Letters Patent of the United States which may be granted  
thereon, and all reissues thereof; and I/We hereby authorize and request the Commissioner of Patents and Trademarks of the  
United States to issue all Letters Patent for this invention to assignee, its successors and assigns, in accordance with the terms  
of this Assignment;

AND, I/WE HEREBY further covenant and agree that I/We will, without further consideration, communicate with  
assignee, its successors and assigns, any facts known to me/us respecting this invention and testify in any legal proceeding,  
sign all lawful papers when called upon to do so, execute and deliver all papers that may be necessary or desirable to perfect  
the title to this invention in said assignee, its successors and assigns, execute all divisional, continuation, and reissue  
applications, make all rightful oaths and generally do everything possible to aid assignee, its successors and assigns, to obtain  
and enforce proper patent protection for this invention in the United States, it being understood that any expense incident to  
the execution of such papers shall be borne by the assignee, its successors and assigns.

IN TESTIMONY WHEREOF, I/We have hereunto set our hand(s).

1. FULL NAME OF SOLE OR FIRST ASSIGNOR KAZUO KOIKE	ASSIGNOR'S SIGNATURE 	DATE March 6.
ADDRESS c/o KOIKE MEDICAL CO., LTD. 24-8, Matsushima 1-chome, Edogawa-ku, Tokyo, Japan	CITIZENSHIP Japan	
2. FULL NAME OF SECOND ASSIGNOR, IF ANY YASUFUMI HISASUE	ASSIGNOR'S SIGNATURE 	DATE March 5, 2001
ADDRESS c/o KOIKE MEDICAL CO., LTD. 24-8, Matsushima 1-chome, Edogawa-ku, Tokyo, Japan	CITIZENSHIP Japan	
3. FULL NAME OF THIRD ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS	CITIZENSHIP	
4. FULL NAME OF FOURTH ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS	CITIZENSHIP	
5. FULL NAME OF FIFTH ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS	CITIZENSHIP	
6. FULL NAME OF SIXTH ASSIGNOR, IF ANY	ASSIGNOR'S SIGNATURE	DATE
ADDRESS	CITIZENSHIP	

LAW OFFICES OF TOWNSEND &amp; BANTA • WASHINGTON, D.C.