

01-29-2002

FORM PTO-1595
(Rev. 6-93)

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OMIB No. 065-0011 (exp. 4/94)

101950967

Tab settings

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

1. Name of conveying party(ies):

DAVID F. KREITZER
DAN B. POOL

Additional name(s) of conveying party(ies) attached? Yes No

2. Name and address of receiving party(ies)

Name: SOUTHWEST MEDICAL PRODUCTS INC.

Internal Address: _____

Street Address: 29834 N CAVE CREEK RD

SUITE 118 - PMB 183

City: CAVE CREEK State: AZ ZIP: 85331

Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance:

- Assignment Merger
- Security Agreement Change of Name
- Other _____

Execution Date: 03 October 2001

4. Application number(s) or patent 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)

B. Patent No.(s)

5,735,272

Additional numbers attached? Yes No

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

Name: ROBERT A. PARSONS

Internal Address: _____

Street Address: 340 E PALM LN

SUITE 260

City: PHOENIX State: AZ ZIP: 85004

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 3.41).....\$ 160.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

01/29/2002 DBYRNE 00000285 5735272

01 FC:581 40.00 OP
02 FC:584 120.00 OP

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.

ROBERT A. PARSONS
Name of Person Signing

Signature

28 JANUARY 2002
Date

Total number of pages including cover sheet, attachments, and document: 5

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

PATENT
REEL: 012343 FRAME: 0293

ASSIGNMENT

In consideration of Ten Dollars (\$10.00) and other valuable consideration, of which we acknowledge receipt, we, MICHAEL DILLON, an individual residing at 8436 West Piccadilly Road, Phoenix, Arizona 85037; DAVID F. KREITZER, an individual residing at 9049 North Arroya Grande Drive, Phoenix AZ 85028; and DAN B. POOL, an individual residing at 12772 East Turquoise, Phoenix, Arizona 85029 hereby sell, and assign to SOUTHWEST MEDICAL PRODUCTS, INC., a company having offices at 29834 North Cave Creek Road, Suite 118 - PMB 183, Cave Creek, Arizona 85331, its successors and assigns, the entire right, title and interest in and to U.S. Patent No. 5,735,272 entitled *TUBE HOLDER HAVING A NASAL DILATOR ATTACHED THERETO*, and any and all applications for patent and patents therefor in any and all countries, including all divisions, reissues, continuations and extensions thereof, and all rights of priority resulting from the filing of said United States application, and authorize and request any official whose duty it is to issue patents, to issue any patent on said improvements or resulting therefrom to said SOUTHWEST MEDICAL PRODUCTS, INC., or its successors or assigns and agree that on request and without further consideration, but at the expense of SOUTHWEST MEDICAL PRODUCTS, INC., I will communicate to said SOUTHWEST MEDICAL PRODUCTS, INC., or its representatives or nominees, any facts known to me respecting said improvements and testify

in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths and generally do everything possible to aid SOUTHWEST MEDICAL PRODUCTS, INC. its successors, assigns and nominees, to obtain and enforce proper patent protection for said invention in all countries. We covenant with said SOUTHWEST MEDICAL PRODUCTS, INC., its successors and assigns, that the rights and property hereby covered are free and clear of any encumbrances, and that we have full right to convey the same as herein expressed.

DATE

Michael Dillon

STATE OF

)

) ss

County of

)

Subscribed and sworn to before me, this _____ day
of _____, 2001.

IN WITNESS WHEREOF, I have set my hand and official
seal.

NOTARY PUBLIC

(SEAL)

10.03.01

David F. Kreitzer

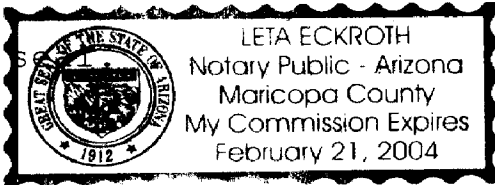
DATE

David F. Kreitzer

STATE OF Arizona)
County of Maricopa) SS

Subscribed and sworn to before me, this 3 day
of October, 2001.

IN WITNESS WHEREOF, I have set my hand and official



(SEAL)

Leta Eckroth
NOTARY PUBLIC

October 3-2001
DATE

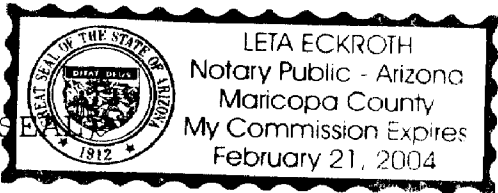
Dan B. Pool
Dan B. Pool

STATE OF Arizona)
County of Maricopa) SS

Subscribed and sworn to before me, this 3 day
of October, 2001.

IN WITNESS WHEREOF, I have set my hand and official

seal.



(SEAL)

Leta Eckroth
NOTARY PUBLIC