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

2. Name and address of receiving party(ies)

Name: Government of the United States of America

Internal Address: Department of the Army

ATTN: SMDC-LC-H (C. Green)

Street Address: 106 Wynn Drive

City: Huntsville State: AL Zip: 35805

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

3. Nature of conveyance:

- Assignment Merger Security Agreement Change of Name Other Confirmatory License

Execution Date: December 12, 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) 09/630,511

B. Patent No.(s)

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

Name: U.S. Army Space & Missile Defense Command

Internal Address: ATTN: SMDC-LC-H (C. Green)

Street Address: 106 Wynn Drive

City: Huntsville State: AL Zip: 35805

6. Total number of applications and patents involved: 1

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

CONFIRMATORY INSTRUMENT

APPLICATION FOR (TITLE OF INVENTION)

Anti-Waveguide Routing Structure - 4

INVENTORS(S)

Tony C. Kowalczyk, William K. Bischel, Michael J. Brinkman, and Stanley Timothy Lau

SERIAL NO.
09/630,511

FILING DATE
August 2, 2000

CONTRACTOR
Gemfire Corporation

CONTRACT NO.
DASG60-96-C-0149

The invention identified above is a "Subject Invention" under Patent Rights Clauses 52.227-11 and 252.227-709

_____ included in Contract No. DASG60-96-C-0149 with
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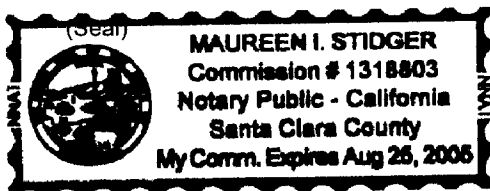
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BY: Mary De
CONTRACTOR'S OFFICIAL AND TITLE
VP, HR & Legal Affairs

2471 E. Bayshore Road, #600
Palo Alto, CA 94303
BUSINESS ADDRESS

Maureen I. Stidger 12/12/01

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Santa Clara } ss.

On 12/12/01, before me, Maureen J. Stedger
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared Nancy Dearborn
Name(s) of Signer(s)

personally known to me
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to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.
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