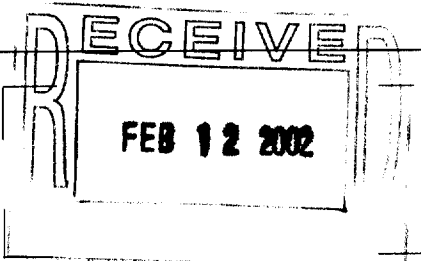


FORM PTO-1619A
Expires 06/30/99
OMB 0651-0027

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03-05-2002



102001893

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

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Document ID#

☐ Correction of PTO Error
Reel # Frame #

☐ Corrective Document
Reel # Frame #

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☐ License ☐ Change of Name

☐ Merger ☒ Other

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Domestic Representative Name and Address

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Mail documents to be recorded with required cover sheet(s) information to:
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PATENT
REEL: 012619 FRAME: 0847

Correspondent Name and Address

Area Code and Telephone Number **815-385-2617**

Name **Jon Carl Gealow**

Address (line 1) **2903 N. Bayview Lane**

Address (line 2) **McHenry, IL 60050**

Address (line 3)

Address (line 4)

Pages

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

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Application Number(s) or Patent Number(s)

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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)

09/908,102

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

PCT

PCT

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): \$ **40.00**

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:

07-0555

Authorization to charge additional fees:

Yes

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No

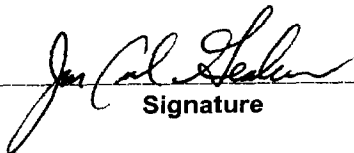
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Statement and Signature

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.

Jon Carl Gealow

Name of Person Signing



Signature

January 8, 2001

Date

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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) Macmillan, Douglas D.

Execution Date
Month Day Year

08 07 2001

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)

☐ Mark if additional names of receiving parties attached

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Name (line 1)

Name (line 2)

Address (line 1)

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Name (line 2)

Address (line 1)

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Patent Application Number(s)

Patent Number(s)

ATTACHED SHEET

This is a corrective assignment to correct wrong application
Serial No. 09/908,091 recorded at Reel/Frame: 012193/0585
to the correct application Serial No. 09/908,102.

Correspondent Name and Address

Area Code and Telephone Number **815-385-2617**

Name **Jon Carl Gealow**

Address (line 1) **2903 N. Bayview Lane**

Address (line 2) **McHenry, IL 60050**

Address (line 3)

Address (line 4)

Pages

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Application Number(s) or Patent Number(s)

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Patent Number(s)

09/908,091

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Month Day Year

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PCT

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PCT

PCT

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Fee Amount for Properties Listed (37 CFR 3.41): \$ **40.00**

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:

07-0555

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.

Jon Carl Gealow

Name of Person Signing

Signature

September 21, 200

Date

RECORDATION FORM COVER SHEET
CONTINUATION
PATENTS ONLY

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

Conveying Party(ies)

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Enter additional Conveying Parties

Name (line 1) Macmillan, Douglas D.

Execution Date
Month Day Year

08 07 2001

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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Enter additional Receiving Party(ies)

Name (line 1)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

Name (line 1)

Name (line 2)

Address (line 1)

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☐ 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

We, **Bjarki HALLGRIMSSON, Sarah DOBBIN and Douglas D. MACMILLAN**, whose full post office addresses are **167 Crocus Avenue, Ottawa, Ontario K1H 6E5, Canada; Apt. 2, 89 Cambridge Street North, Ottawa, Ontario K1R 7A6 Canada and 389 Templeton Street, Ottawa, Ontario K1N 6Y1, Canada**, respectively, in consideration of the sum of Ten Dollars (\$10.00), the receipt and sufficiency of which are hereby acknowledged, do hereby sell and assign to **RANDOM PRODUCTS TRUST**, whose full post office address is **Lauriston House, Lower Collmore Rock Drive, P.O. Box 1132, Bridgetown, Barbados**, its successors and assigns, the entire right, title and interest in and to all subject matter invented or designed by us and disclosed in the application for Letters Patent of the United States entitled **“COMBINATION WALKER AND TRANSPORT CHAIR”** executed by us on the date hereinafter set forth, and any divisions and continuations thereof and in and to all Letters Patent of the United States including any reissues and extensions thereof that may be obtained therefor, and the right, where such right can be legally exercised, in its own name to apply for and obtain Letters Patent, Inventor's Certificates, Utility Model and Designs, in countries foreign to the United States, including the full right to claim for any such application the benefits of the International Convention as fully and entirely as we could have done if the application had been in our name, and we hereby authorize and request the Commissioner of Patents and Trademarks of the United States, and any official of any country or countries foreign to the United States whose duty it is to issue Letters Patent, Inventor's Certificates, Utility Models or Designs, on applications as aforesaid, to issue any and all Letters Patent, Inventor's Certificates, Utility

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of : COMBINATION WALKER WITH TRANSPORT CHAIR
Bjarki Hallgrimsson et al :
Serial No: 09/908,102 : Group Art Unit: 3611
Filed: July 18, 2001 : Examiner:

SUBMISSION OF ASSIGNMENT FOR CORRECTIVE RECORDING

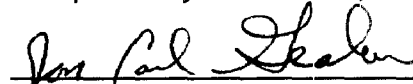
Box Assignment
Director - U.S. Patents and Trademark Office
Washington, DC 20231

Sir:

Please find enclosed:

1. **Recordation Form Cover Sheet** for corrective recording of assignment of the subject Patent Application.
2. **Assignment** (Two Pages)
3. Copy of **Notice of Recordation of Assignment Document** and **Recordation Form Cover Sheet** (3 Pages) setting forth incorrect serial number 09/908,091.
4. Please charge the fee of \$40.00 set forth in 37 CFR 1.21(h) for the corrective recording of the assignment to our Deposit Account No. 07-0555.
5. Post Card Receipt.

Respectfully submitted,



Jon Carl Gealow, Reg. No. 22,386
Jon C. Gealow & Associates
2903 N. Bayview Lane
McHenry, IL 60050
Telephone: 815-385-2617
Facsimile: 815-385-2619

January 8, 2002

Enclosed for the Office is correspondence is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Box **ASSIGNMENT**
Commissioner of Patents and Trademarks, Washington, D.C. 20231 **DIRECTOR**

on: **JANUARY 16, 2002**
Date of Deposit

Jon Carl Gealow
Registered Representative


Signature

1/16/02
Date of Signature