

03-19-2002

MAR 14 2002

Form PTO-1595 (Rev. 03/01)		Rf		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
OMB No. 0651-0027 (exp. 5/31/2002)		102022895			
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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): P5, Inc., as successor to P5 e.Health Services, Inc. 3-14-02 Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No			2. Name and address of receiving party(ies) Name: <u>Zions SBIC, L.L.C.</u> Internal Address: <u>c/o Wasatch Venture Fund</u> Street Address: <u>One South Main St.,</u> <u>Suite 1660</u> Salt Lake City UT 84133 City: _____ State: _____ Zip: _____ Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input checked="" type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: <u>March 12, 2002</u>					
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) <u>09/634,679, 09/952,568, 09/724,097,</u> <u>09/756,077, 10/044,384, 10/044,357,</u> <u>10/044,341</u> Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Anna M. Kuzmik</u> Internal Address: <u>8th Floor</u> Street Address: <u>1701 Pennsylvania Ave., NW</u> City: <u>Washington</u> State: <u>DC</u> Zip: <u>2002</u>			6. Total number of applications and patents involved: <u>9</u> 7. Total fee (37 CFR 3.41).....\$ <u>360.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account)		
<b>DO NOT USE THIS SPACE</b>					
9 Statement and signature. <i>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.</i> <u>Anna M. Kuzmik</u> <u>March 12, 2002</u> Name of Person Signing Signature Date Total number of pages including cover sheet, attachments, and documents: <u>6</u>					

03/18/2002 LMUELLER 00000180 09634679

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

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**PATENT**  
**REEL: 012665 FRAME: 0865**

**ASSIGNMENT FOR SECURITY****(PATENTS)**

WHEREAS, P5, Inc. as successor to P5 eHealth Services, Inc. (the "Assignor") has made certain representations and warranties in the Note and the Purchase Agreement (as defined below) and related documents with respect to the letter patents, design patents and utility patents listed on the annexed Schedule 1A, which patents are issued or applied for in the United States Patent and Trademark Office (the "Patents");

WHEREAS, the Assignor has sold its 8.9% Senior Secured Convertible Note Due February 12, 2004 (the "Note"), pursuant to the terms of a Purchase Agreement, dated February 12, 2002 (the "Purchase Agreement"), to Zions SBIC, L.L.C., as lender (the "Assignee");

WHEREAS, pursuant to the Note and the Purchase Agreement, the Assignor has assigned to the Assignee and granted to the Assignee for the benefit of the lender a continuing security interest in all right, title and interest of the Assignor in, to and under the Patents and the applications and registrations thereof (if any) and all continuations in part, reissues, divisions, extensions and rights of priority concerning the foregoing, and all proceeds thereof, including, without limitation, any and all causes of action which may exist by reason of infringement thereof (the "Collateral"), to secure the payment, performance and observance of the Assignor's duties and obligations under the Note and the Purchase Agreement;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Assignor does hereby pledge, convey, sell, assign, transfer and set over unto the Assignee and grants to the Assignee for the benefit of the lender a continuing security interest in the Collateral to secure the prompt payment, performance and observance of the Assignor's duties and obligations under the Note and the Purchase Agreement.

The Assignor does hereby further acknowledge and affirm that the rights and remedies of the Assignee with respect to the Collateral are more fully set forth in the Note and the Purchase Agreement, the terms and provisions of which are hereby incorporated herein by reference as if fully set forth herein.

IN WITNESS WHEREOF, the Assignor has caused this Assignment for Security to be duly executed by its officer thereunto duly authorized as of March 12, 2002.

P5, Inc. as successor to

P5 e.Health Services, Inc.

By:

Name:

Title: Authorized Officer

LA\_LAN01:141287.1

**AFFIDAVIT OF CORPORATE SIGNING AUTHORITY**

CITY: Salt Lake City )

STATE OF: Utah )

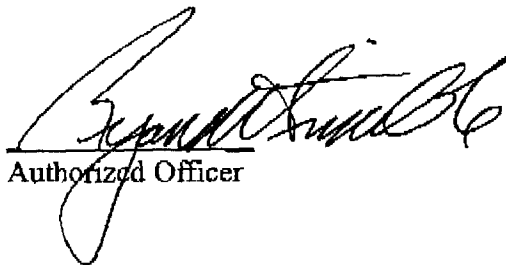
TO WIT: )

I, Ryan M. Trimble, of the City of Salt Lake  
Utah, in the State of Utah, **MAKE OATH AND SAY:**

I am an officer or director or duly authorized signatory of P5, Inc., a Nevada corporation (the "Corporation"), named in the within or annexed instrument.

I am authorized by the Corporation to execute the within instrument.

SWORN BEFORE ME at the City of  
Salt Lake, in the State of Utah,  
this 11th day of March, 2002

  
Authorized Officer

CITY: Salt Lake City )  
 STATE OF: Utah )  
 TO WIT: )

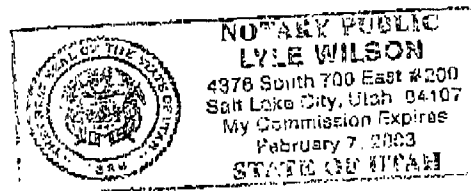
### AFFIDAVIT OF EXECUTION

I Lyle Wilson, of the City of Salt Lake  
 in the State of Utah, a Notary Public duly appointed, make oath and say:

1. I was personally present and did see Ryan M. Trimble, who is personally known to me to be the duly authorized signatory of P5, Inc., a Nevada corporation (the "Corporation"), duly sign and execute the foregoing instrument for the purposes named therein.
2. That the instrument was executed at the City of Salt Lake, in the State of Utah, and that I am the subscribing witness thereto.
3. That I know the said Ryan M. Trimble and he/she is in my belief of the full age of twenty-one years.

SWORN BEFORE ME at the City of )  
Salt Lake in the State of )  
Utah, this 11th day of )  
March, 2002 )

A Notary Public in and for the State of )  
Utah )



*Lyle Wilson*

**Schedule 1A**

Provider Claim Editing and Settlement System

Internet Processing System

Determining the Degree of Acceptance of Proposed Medical Treatment

Interactive Determination of Adjudication Status of Medical Claims

Interactive Creation and Adjudication of Health Care Insurance Claims

Payment of Health Care Insurance Claims Using Short-Term Loans

Facilitating Paperless Processing of Insurance Claims

Processing an Insurance Claim Using Electronic Versions of Supporting Documents

Delivering Electronic Versions of Supporting Documents Associated with and Insurance Claim

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