	3-19-2002
	EPARTMENT OF COMMERCE 3. Patent and Trademark Office
	Please record the attached original documents or copy thereof.
<ol> <li>Name of conveying party(ies): Alan H. Ostroff William J. Rissmann</li> <li>Additional name(s) of conveying party(ies) attached? ☐ Yes ⊠ No</li> </ol>	2. Name and address of receiving party(ies) Name: <u>Cameron Health, Inc.</u> Internal Address:
<ul> <li>3. Nature of conveyance:</li> <li>Assignment</li></ul>	Street Address: <u>924-A Calle Negocio</u>
	City: <u>San Clemente</u> State: <u>CA</u> Zip: <u>92673</u>
Execution Date:February 19, 2002	Additional name(s) & address(es) attached? 🗌 Yes 🛛 No
If this document is being filed together with a new appli A. Patent Application No.(s) 10/011,607	ication, the execution date of the application is: B. Patent No.(s)
Additional numbers at	tached? 🗌 Yes 🖾 No
<ol> <li>Name and address of party to whom correspondence concerning document should be mailed:</li> </ol>	6. Total number of applications and patents involved: 1
Name: <u>Jonathan L. Pettit, Esq</u> .	7. Total fee (37 CFR 3.41)\$40.00
Internal Address: Brobeck, Phleger & Harrison LLP	<ul> <li>Enclosed</li> <li>Authorized to be charged to deposit account</li> </ul>
	8. Deposit account Number:
Street Address: <u>12390 El Camino Real</u>	50-1273         (Attach duplicate copy of this page if paying by deposit account)
City: <u>San Diego</u> State: <u>CA</u> Zip: <u>92130</u>	
	THIS SPACE
<ul> <li>9. Statement and signature.</li> <li>To the best of my knowledge and belief, the foregoing is a true copy of the original document.</li> <li>Jonathan L. Pettit, Reg. No. 40,770 Name of Person Signing</li> </ul>	information is true and correct and any attached copy
Total number of pages including cover Mail documents to be recorded with Commissioner of Patents & T	r sheet, attachments, and documents: 4 required cover sheet information to: Trademarks, Box Assignments h, D.C. 20231
2 FC:581 40.00 DP	
SDILIB1\JB09\430328.01	PATENT

## REEL: 012675 FRAME: 0089

## **ASSIGNMENT**

For valuable consideration, we, ALAN H. OSTROFF of San Clemente, California and a citizen of the United States of America; and WILLIAM J. RISSMANN of Coto de Caza, California and a citizen of the United States of America (hereinafter referred to as "Assignors") hereby assign to CAMERON HEALTH, INC., a corporation organized and existing under and by the virtue of the laws of the State of Delaware and having a place of business at 924-A Calle Negocio, San Clemente, California 92673, and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the invention and improvements which are the subject of an application for United States Patent filed November 5, 2001, U.S. Serial No. 10/011,607 entitled PACKAGING TECHNOLOGY FOR NON-**TRANSVENOUS CARDIOVERTER/DEFIBRILLATOR DEVICES**, and related applications and patents, this assignment including said application, any and all United States and foreign patents granted for any of said inventions or improvements, including all divisions, continuations, reissues, continuations-in-part and extensions thereof, and the right to claim priority based on the filing date of said application and based on the filing date of any provisional application of which said application claims the benefit under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our names or in its own name for patents and like rights of exclusion and for inventor's certificates for said inventions and improvements; and we agree for ourselves and our heirs, legal representatives and assigns, without further compensation, upon request to perform such lawful acts, to promptly provide Assignee with all pertinent facts and documents relating to said invention or application as may be known and accessible to us, to testify in any interference or litigation related to said invention or application and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this Assignment.

The Assignors hereby covenant that no assignment, sale, agreement, or encumbrance has been or will be made or entered into which would conflict with this Agreement.

Page 1 of 3

Patent 032580.0057.CIP1

WITNESS my hand at 974 Calle Negocio San Clanante CA 92675
WITNESS my hand at <u>974</u> Calle Negocio, San Clemente CA 92675 this 19 day of February, 2002.
ALAN H. OSTROFF
STATE OF CAMPORNIA ) COUNTY OF CRANGE CAMPATY ) ss
COUNTY OF CRANGE CRUNITY )
On <u>H11/02</u> before me, <u>JEANETTE A BARETA</u> , personally appeared ALAN H. OSTROFF
personally known to me - <b>OR</b> - <b>Y</b> proved to me on the basis of satisfactory evidence 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.

READENTE A. DODEN

( Jeanute Basie ~

Notary Public in and for said County and State

Patent 032580.0057.CIP1

WITNESS my hand at <u>Quereson Health</u> , Inc. 324A Calle Noveries Sen Clemente, CA 92673 this 19 day of February, 2002.
this 13 day of <u>February</u> , 2002.
Killin Brown
WILLIAM J. RISSMANN
STATE OF <u>CAMPORNIA</u> ) COUNTY OF <u>OPANGE (WINTY</u> )
On 2/19/02 before me, JEANERE A. BAREVA, personally appeared WILLIAM J. RISSMANN

personally known to me - **OR** -  $\checkmark$  proved to me on the basis of satisfactory evidence 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.



antta Busila

Notary Public in and for said County and State