

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

08-23-2002

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



102199924  
**RECORDATION FORM COVER SHEET  
PATENTS ONLY**

*Resubm*

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

**Submission Type**

New *8-20-02*

Resubmission (Non-Recordation)  
Document ID# 102106815

Correction of PTO Error  
Reel #  Frame #

Corrective Document  
Reel # 010523 Frame # 0633

**Conveyance Type**

Assignment  Security Agreement

License  Change of Name  
Change "SA" to --SAS--

Merger  Other  Corrective Assignment

**U.S. Government**  
(For Use ONLY by U.S. Government Agencies)

Departmental File  Secret File

**Conveying Party(ies)**

Mark if additional names of conveying parties attached

Name (line 1) FAYOL, Andre Execution Date Month Day Year 01252000

Name (line 2)

**Second Party**

Name (line 1)

Name (line 2)

Execution Date Month Day Year

**Receiving Party**

Mark if additional names of receiving parties attached

Name (line 1) THYSSEN ASCENSEURS SAS

Name (line 2)

Address (line 1) Rue de Champfleur

Address (line 2) ZI Saint-Barthelemy

Address (line 3) ANGERS CEDEX 01 FRANCE 49001  
City State/Country Zip Code

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached (Designation must be a separate document from Assignment.)

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**FOR OFFICE USE ONLY**

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

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

**PATENT**  
REEL: 013207 FRAME: 0717

**Correspondent Name and Address** Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

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

**Application Number(s) or Patent Number(s)**  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)		
<input type="text" value="29117809"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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. #

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

Method of Payment: Enclosed  Deposit Account

Fees were paid on May 23, 2002

(Enter for payment by deposit account or if additional fees can be charged to the account.)

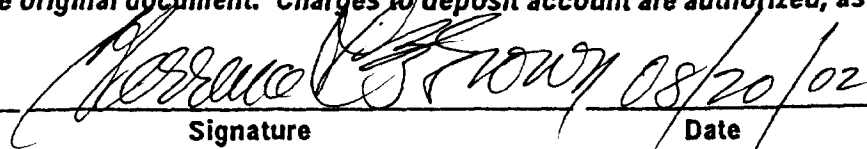
Deposit Account Number: #

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.

Terrence L.B. Brown  
Name of Person Signing

  
Signature

08/20/02  
Date

FORM PTO-1619A  
Expires 08/30/99  
OMB 0651-0027



05-30-2002  
102106815

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

RECORDATION FORM COVER SHEET  
PATENTS ONLY

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

Submission Type

New *5-23-02*

Resubmission (Non-Recordation)  
Document ID# [ ]

Correction of PTO Error  
Reel # [ ] Frame # [ ]

Corrective Document  
 Reel # 010523 Frame # 0633

Conveyance Type

Assignment  Security Agreement

License  Change of Name  
Change "SA" to --SAS--

Merger  Other  Corrective Assignment

**U.S. Government**  
(For Use ONLY by U.S. Government Agencies)

Departmental File  Secret File

Conveying Party(ies)

Mark if additional names of conveying parties attached Execution Date  
Month Day Year

Name (line 1) FAYOL, André

01 25 2000

Name (line 2) [ ]

Second Party

Name (line 1) [ ]

Execution Date  
Month Day Year

Name (line 2) [ ]

Receiving Party

Mark if additional names of receiving parties attached

Name (line 1) THYSSEN ASCENSEURS SAS

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached (Designation must be a separate document from Assignment.)

Name (line 2) [ ]

Address (line 1) [ ]

Address (line 2) [ ]

Address (line 3) [ ] City State/Country Zip Code

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name [ ]

Address (line 1) [ ]

Address (line 2) [ ]

Address (line 3) [ ]

Address (line 4) [ ]

FOR OFFICE USE ONLY

05/29/2002 DBYRNE 00000057 29117009  
61 FC:581 40.00 OP

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

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

PATENT  
REEL: 013207 FRAME: 0719

**Correspondent Name and Address**      **Area Code and Telephone Number**

**Name**

**Address (line 1)**

**Address (line 2)**

**Address (line 3)**

**Address (line 4)**

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

**Application Number(s) or Patent Number(s)**       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)		
<input type="text" value="29117809"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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 <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>
PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>

**Number of Properties**      Enter the total number of properties involved.      #

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

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:      #

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.

Terrence L.B. Brown           

Name of Person Signing      Signature      Date

02-08-2000

HEET

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office



101261978

Tab settings == == v

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

1. Name of conveying party(ies):

André FAYOL

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

2. Name and address of receiving party(ies)

Name: THYSSEN ASCENSEURS SA

Internal Address:

Street Address: Rue de Champfleur, ZI  
Saint-Barthélemy, BP 126, 49001

Angers Cedex 01, France  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

U.S. PTO  
29/117809  
01/27/00

3. Nature of conveyance:

- Assignment  Merger
- Security Agreement  Change of Name
- Other \_\_\_\_\_

Execution Date: January 25, 2000

4. Application number(s) or patent number(s):

29/117809

If this document is being filed together with a new application, the execution date of the application is: January 25, 2000

A. Patent Application No.(s)

B. Patent No.(s)

02/04/2000 NHASSANI 00000117 29117809

02 FC:581

40.00 DP

Additional numbers attached?  Yes  No

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

Name: SHLESINGER, ARKWRIGHT & GARVEY LLP

Internal Address:

Street Address: 3000 SOUTH EADS STREET

City: ARLINGTON State: VA ZIP: 22202

6. Total number of applications and patents involved:

1

7. Total fee (37 CFR 3.41).....\$ 40.00

Enclosed

Authorized to be charged to deposit account

8. Deposit account number:

19-2105 (Deficiencies Only)

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

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.

Terrence L. B. Brown  
Name of Person Signing

*Terrence L. B. Brown*  
Signature

January 27, 2000  
Date

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

3

A S S I G N M E N T

WHEREAS, I, André FAYOL, having a post office address at Rue de Champfleury, ZI Saint-Barthélemy, BP 126, 49001 ANGERS CEDEX 01, France, have invented new and useful improvements in ELEVATOR for which I am about to make application for Letters Patent of the United States, said application having been executed on the 25<sup>th</sup> day of January 2000; and

WHEREAS, THYSSEN ASCENSEURS SAS, having a place of business at Rue de Champfleury, ZI Saint-Barthélemy, BP 126, 49001 ANGERS CEDEX 01, France, is desirous of acquiring the entire right, title and interest in and to said invention and said application for Letters patent and in and to any Letters Patent that may be granted therefor in the United States and in any and all foreign countries;

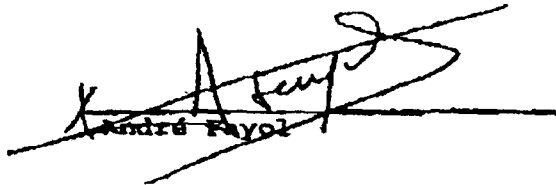
NOW THEREFORE, in consideration of the sum of One Dollar (\$1.00) to me in hand paid, the receipt of which is hereby acknowledged, and for other good and valuable consideration, I, André FAYOL, hereby assign, sell and transfer unto said THYSSEN ASCENSEURS SAS, the full and exclusive right to said invention in the United States and its territorial possessions and in all foreign countries, and said application for Letters Patent and any and all inventions disclosed therein and the entire right, title and interest in and to any and all Letters Patent which may be granted therefor in the United States and its territorial possessions and in any and all foreign countries and in and to any and all divisions, reissues, continuations and extensions thereof.

I hereby authorize and request the Patent Office officials in the United States and in any and all foreign countries to issue any and all of said ~~Letters~~ Patent, when granted, to said THYSSEN ASCENSEURS SAS <sup>5/17/00 per Del</sup> as the assignee of my entire right, title and interest in and to the same, for the sole use and behoof of said THYSSEN ASCENSEURS SAS <sup>5/17/00 per Del</sup>, its successors and assigns.

Further, I agree that I will communicate to said THYSSEN ASCENSEURS SAS <sup>5/17/00 per Del</sup> or its representatives any facts known to me respecting said invention, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuations, substitutions, renewal and reissue applications, execute all necessary assignment papers to cause any and all of said Letters Patent to be issued to said THYSSEN ASCENSEURS SAS <sup>5/17/00 per Del</sup>, make all rightful oaths and generally to do everything possible to aid said THYSSEN ASCENSEURS SAS <sup>5/17/00 per Del</sup>, its successors and assigns, to obtain and enforce protection for said invention in the United States and in any and all foreign countries.

IN TESTIMONY WHEREOF, I have hereunto set my hand this

X 25<sup>th</sup> day of X January, 2000.

  
André Fayol