2 3	2002	R			ΞT		
- 7	' 25/	= -		02285183 Please record the attached			
ADS	TOWNE Commission Ty			Conveyance Type	Jocu	ment(s) or copy(ies).	
-	<u></u>	10-6	3-02	Assignment	☐ Security	Agreement	
	Resubmissio Document ID	n (Non-Recordation)		License	☐ Change	of Name	
	Correction of	<del></del>		☐ Merger	Other		
1	L. Reel#	Frame #			U.S. Gove		
	Corrective Do	ocument Frame			•	overnment Agencies)	
		#		Departm	ental File	Secret File	e 
	Conveying Par	Conveying Party(ies)		Mark if additional name	g parties attached Execution Dat	e	
	Name (line 1)	Matthew Sinclair				Month Day	Year 2002
	(mio 1)	Water Cw On loan				00 27 2	.002
	Name (line 2)						
	Second Party					Execution Dat  Month Day	e Year
	Name (line 1)						
	Name of Winds ON						
	Name (line 2)						
	Receiving Party Name (line 1)			Mark if additional names o		f receiving parties attached	
	Name (into 1)	Nona Corporatori				If document to to is an assignme	
	Name (line 2)					receiving party domiciled in the	United S
	Address (line 1)	Keilalahdentie 4				an appointmen representative	is attached
	Address (line 2)		<u></u> -			(Designation m separate docur Assignment.)	
	,					, loaiginnein.)	
	Address (line 3)	FIN-01250 ESPO	)	FINLAND			
}	Domestic Rep	City resentative Name	and Ad	State/Country  dress Enter for the	e first Receivi	Zip Code ng Party only.	
	Name						
	Address (line 1)						
	Address (line 2)						
لمر	Address (line 3)						
	Address (line 4)						
T	IAZ1 00000146 1	90733 29164645		FOR OFFICE USE ONLY	,		
- '							

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: 013490 FRAME: 0492

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)  Patent Number(s)  Patent Number(s)  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.  Patent Cooperation Treaty (PCT)  Enter PCT application number PCT PCT PCT PCT  Only if a U.S. Application Number as not been assigned.  Number of Properties  Enter the total number of properties involved. # 1	FORM PTO-16 Expires 06/30/99 OMB 0651-0027	19B	Page 2	U.S. Department of Commerce   Patent and Trademark Office   PATENT							
Address (line 2) 1001 G Street NW  Address (line 2) 1001 G Street NW  Address (line 3) Eleventh Floor  Address (line 4) Washington, D. C. 20001-4597  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 of the Patent Number (DO NOT ENTER BOTH numbers for the same property).  Patent Application Number(s) Patent Number(s) Patent Number (so Not ENTER BOTH numbers for the same property).  Patent Application Number(s) Patent Number(s) Patent Number(s) Patent Number(s).  Patent Patent Number(s) Patent Number(s) Patent Number (so Not ENTER BOTH numbers for the same property).  Patent Number(s) Patent Number(s) Patent Number(so Not Enter Both number so the same property).  Patent Cooperation Treaty (PCT)  Enter PCT application number pCT	Corresponden	t Name and Address	Area Code and Telephone Num	ber (202) 508-9100							
Address (line 2) 1001 G Street NW  Address (line 3) Eleventh Floor  Address (line 4) Washington, D. C. 20001-4597  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) Patent Number(s)  29/164.645	Name	Robert S. Katz									
Address (line 4) Washington, D. C. 20001-4597  Pages	Address (line 1)	BANNER & WITCOFF, L	TD.								
Pages  Enter the total number of pages of the attached conveyance document including any attachments  Application Number(s) or Patent Number(s)	Address (line 2)	1001 G Street NW									
Enter the total number of pages of the attached conveyance document including any attachments  Application Number(s) or Patent Number(s)	Address (line 3)	Eleventh Floor									
Application Number(s) or Patent Number(s)	Address (line 4)	Washington, D. C. 20001	-4597								
Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).  Patent Application Number(s)  29/164,645    If this document is being filed together with a new Patent Application, enter the date the patent application was   Month   Day   Year	Pages			ince document # 4							
Patent Application Number(s)  29/164.645  If this document is being filed together with a new Patent Application, enter the date the patent application was Month Day Year signed by the first named executing inventor.  Patent Cooperation Treaty (PCT)  Enter PCT application number PCT	Application Number(s) or Patent Number(s)   Mark if additional numbers attached.										
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.    Patent Cooperation Treaty (PCT)		* *	e Patent Number (DO NOT ENTER								
It 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.  Patent Cooperation Treaty (PCT)  Enter PCT application number only if a U.S. Application Number as not been assigned.  PCT		it Application Number(s)		Patent Number(s)							
Patent Cooperation Treaty (PCT)  Enter PCT application number PCT	29/164,645										
Patent Cooperation Treaty (PCT)  Enter PCT application number PCT											
Patent Cooperation Treaty (PCT)  Enter PCT application number PCT											
Patent Cooperation Treaty (PCT)  Enter PCT application number only if a U.S. Application Number as not been assigned.  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  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: # 19-0733  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.	it this document is being fried together with a new raterit Application, enter the date are patent application was										
Enter PCT application number only if a U.S. Application Number as not been assigned.  Number of Properties  Enter the total number of properties involved.  Fee Amount  Fee Amount for Properties Listed (37 CFR 3.41):  Deposit Account  Enter for payment: 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.  Robert S. Katz, Reg. No. 36,402											
Number of Properties  Enter the total number of properties involved. # 1  Fee Amount  Fee Amount for Properties Listed (37 CFR 3.41): \$ 40  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: # 19-0733  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.  Robert S. Katz, Reg. No. 36,402	-	, ,	T PCT	PCT							
Number as not been assigned. 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  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: # 19-0733  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.  Robert S. Katz, Reg. No. 36,402		app.:.eas.eee									
Fee Amount  Fee Amount for Properties Listed (37 CFR 3.41): \$ 40  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: # 19-0733  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.			T PCT	PCT							
Method of Payment: Enclosed ☐ Deposit Account ☑ Deposit Account ☑ Deposit Account Enter for payment by deposit account or if additional fees can be charged to the account.)  Deposit Account Number: # 19-0733  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.  Robert S. Katz, Reg. No. 36,402	Number of Properties  Enter the total number of properties involved. # 1										
Deposit Account Enter for payment by deposit account or if additional fees can be charged to the account.)  Deposit Account Number:  # 19-0733  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.  Robert S. Katz, Reg. No. 36,402	Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$ 40										
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.  Robert S. Katz, Reg. No. 36,402			osed Deposit Accoun	ıt 🛛							
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.  Robert S. Katz, Reg. No. 36,402	Enter for pa	ment by deposit account or if additio	nal fees can be charged to the acco	'							
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.  Robert S. Katz, Reg. No. 36,402		Deposit Accor	unt Number:	# 19-0733							
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.  Robert S. Katz, Reg. No. 36,402		Authorization	to charge additional fees:	Yes 🛭 No 🗌							
attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.  Robert S. Katz, Reg. No. 36,402	Statement and	Signature									
	attached copy is a true copy of the original document. Charges to deposit account are authorized, as										
Name of Person Signing Signature Date	Robert S. Katz, Re	j. No. 36,402	DAZE!	10/21/02							
ı			Signature	Date							

## **ASSIGNMENT**

WHEREAS, I, Matthew Sinclair, residing at Museokatu 25 B 24, FIN-00100 Helsinki, FINLAND (ASSIGNOR), am the inventor of certain inventions and improvements described in a U.S. patent application identified by Attorney Docket No. 006089.00047 and having the title

## KEY BUTTONS FOR A HANDSET

which application was

filed on July 30, 2002 and assigned application number 29/164,645;

and WHEREAS

Nokia Corporation Keilalahdentie 4 FIN-01250 ESPOO FINLAND

ASSIGNEE, desires to acquire the entire right, title and interest in and to the said application, inventions and improvements and any patents that may be granted on or as a result thereof in the United States of America (U.S.) and in any and all foreign countries;

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged,

I hereby assign, to the above named ASSIGNEE, its successors, assigns and legal representatives (NOMINEES) the entire right, title and interest in and to said application, inventions and improvements throughout the world and to any and all patents, petty patents and utility model patents which may be granted therefor, and all continuations, continuations-in-part, divisions, reissues, extensions, renewals, and any non-provisional based on a provisional thereof (LETTERS PATENT).

And I covenant that I have full right to convey the entire interest herein assigned, and that I have not executed and will not execute any agreement or do anything in conflict herewith;

And I further covenant and agree that I will without undue delay execute without further consideration all such papers as may be necessary to perfect the title to said application, inventions and improvements, and LETTERS PATENT in the ASSIGNEE or its NOMINEES, and I agree to communicate to said ASSIGNEE or its NOMINEES all known facts respecting said application, inventions, improvements, and LETTERS PATENT, to testify in any legal proceedings, to sign all lawful papers, and generally to do all things necessary to aid ASSIGNEE or its NOMINEES to obtain and enforce for their own benefit patent protection for said application, inventions and improvements in any and all countries, all at the expense, however, of the ASSIGNEE or its NOMINEES;

Page 1 of 2

PATENT REEL: 013490 FRAME: 0494 And I authorize the ASSIGNEE or its NOMINEES to file in my name or their own, as appropriate, application for LETTERS PATENT in any and all countries of the world, and I authorize and request the Commissioner of Patents and Trademarks of the United States, and any proper official of any country, to issue to said ASSIGNEE or its NOMINEES any and all LETTERS PATENT for said application, inventions and improvements, for their sole use, to the full end of the term for which such LETTERS PATENT may be granted;

And I hereby grant my attorneys at the law firm of Banner & Witcoff the power to insert into this document information sufficient to identify the patent application to which this assignment pertains.

Date: 25/09 / 02 Inventor:

Matthew Sinclair

Note: No legalization or other witness required.

LAW OFFICES
BANNER & WITCOFF, LTD.
1001 G STREET, N.W.
WASHINGTON, D.C. 20001-4597
(202) 508-9100

Page 2 of 2

PATENT REEL: 013490 FRAME: 0495