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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):

Richard D. Lohrman

11/27/02

2. Name and address of receiving party(ies)

Name: Owens-Illinois Closure Inc.

Internal Address: _____

Street Address: One SeaGate

City: Toledo State: OH Zip: 43666

JP 0957 U.S. PTO
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Additional name(s) of conveying party(ies) attached? Yes No

3. Nature of conveyance:

- Assignment Merger
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- Other _____

Execution Date: 11/26/2002

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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: 11/26/2002

A. Patent Application No.(s) _____

B. Patent No.(s) _____

Additional numbers attached? Yes No

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

Name: Nirav D. Parikh

Internal Address: Owens-Illinois, Inc.

Street Address: One SeaGate, 25-LDP

City: Toledo State: OH Zip: 43666

6. Total number of applications and patents involved:

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

- Enclosed
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15-0875

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9. Signature.

Nirav D. Parikh
Name of Person Signing

Nirav D. Parikh
Signature

11/27/02
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