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To the Director of the United States F 10239829	1					
Name of conveying party(ies):	Name and address of receiving party(ies):					
shinji AOKI 3. 12.03						
Masashi TAKAHASHI						
Masashi HIROKI	TOSHIBA TEC KABUSHIKI KAISHA					
Takeshi WATANABE	1-1, Kandanishiki-cho, Chiyoda-ku					
	Tokyo, Japan					
	<u>e</u>					
	و به					
	28 E					
Additional conveying party(ies) NO						
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ASSIGNMENT	<u>v</u> = 0					
	T =					
Execution Date: March 4, 2003	Additional name(s) & address(es) attached? NO					
4. Application number(s) or patent number(s):						
	10385716					
If this is being filed together with a new application, the	e execution date of the application is: March 4, 2003					
A. Patent Application Number(s):	B. Patent Number(s):					
A. Faterit Application Number(3).	B. Tatoni rambor(o)					
	ers attached? NO					
5. Name and address of party to whom correspondence	6. Total number of applications/patents involved: 1					
concerning document should be mailed:	7. Total fee (37 C.F.R. § 3.41): \$40.00					
Pavan K. Agarwal	7. Total lee (37 C.F.R. 3 3.41).					
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Pavan K. Agarwal	1/1/ / ////// Widicii 12, 2003					
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PATENT REEL: 013871 FRAME: 0545

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ASSIGNMENT

For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, each undersigned inventor has sold and assigned, and by these presents hereby sells and assigns, unto

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Tokyo, Japan

"IMAGE FORMING APPARATUS"

assignee

title of

(hereinafter ASSIGNEE) all right, title and interest for the United States, its territories and possessions in and to this invention relating to

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NAMES AND SIGNATURES OF INVENTORS					
Name:	Shinji AOKI	Signature: Shinji Woki	Date: 7 4, 2013		
Name:	Masashi TAKAHASHI	Signature: Masushi Jakahashi	Date: Gran. 4, 2003		
Name:	Masashi HIROKI	Signature: Musashi Kiroki	Date: Mar. 4, 2003		
Name:	Takeshi WATANABE	Signature: Jakeshi Watanale	Date Man 4,2003		
Name:		Signature:	Date:		
NAMES AND SIGNATURES OF WITNESSES					
Name:	Rie SHIRAHATA	Signature: Rie Sunhata	Date: Mar. 4, 200		
Name:		Signature:	Date:		

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