


Substitute Form PTO-1595  
 Attorney Docket No.: 10286-014001  
 Client's Ref. No.: BWH-20

## RECORDATION FORM COVER SHEET PATENTS ONLY

Commissioner for Patents: Please record the attached original document(s) or copy(ies).	
1. Name of conveying party(ies): <b>Robert Sackstein</b> Additional name(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies): <b>The Brigham and Women's Hospital, Inc.</b> <b>75 Francis Street</b> <b>Boston, MA 02115</b>  Additional names/addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other:  Execution Date: <b>05/20/2003</b>	Additional names/addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Application number(s) or patent number(s): If this document is being filed with a new application, the execution date of the application is: A. Patent Application No(s): <b>10/042,421</b> B. Patent No(s):  Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Name/address of party to whom correspondence concerning document should be mailed:  <b>LOUIS MYERS</b> <b>Fish &amp; Richardson P.C.</b> <b>225 Franklin Street</b> <b>Boston, MA 02110-2804</b>	6. Total number of applications/patents involved: <b>1</b>  7. Total fee (37 CFR §3.41): <b>\$40</b> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to charge Deposit Account.  8. Deposit Account No.: <b>06-1050</b> Please apply any additional charges, or any credits, to our Deposit Account No. <b>06-1050</b> .
<b>DO NOT USE THIS SPACE</b>	
9. Statement and Signature: <i>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.</i>	
Laurie Butler Lawrence Reg. No. 46,593 Name of Person Signing	 Signature
Date: <u>9/2/03</u>	
Total number of pages including coversheet, attachments and document: <b>2</b>	

CH \$40.00 061050 10042421

20715274.doc

**CERTIFICATE OF TRANSMISSION BY FACSIMILE**

I hereby certify that this correspondence is being transmitted by facsimile to the Patent and Trademark Office on the date indicated below.

9/3/03 Date of Transmission      Cassandra Beepot Signature      Cassandra Beepot Typed Name of Person Signing Certificate

**PATENT**

**700042513**

**REEL: 013936 FRAME: 0502**

Attorney Docket No: 10286-014001/BWH-20

ASSIGNMENT

For valuable consideration, I, ROBERT SACKSTEIN of Sudbury, Massachusetts, hereby assign to Brigham and Women's Hospital, a Massachusetts corporation having a place of business at:

75 Francis Street  
Boston, MA 02115; and

its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent signed by me, entitled HEMATOPOIETIC CELL E-SELECTIN/L-SELECTIN LIGAND POLYPEPTIDES AND METHODS OF USE THEREOF, filed October 18, 2001, and assigned U.S. Serial Number 10/042,421; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application 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 I authorize the Assignee to apply in all countries in my name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and I agree for myself and my respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

IN WITNESS WHEREOF, I hereto set my hand and seal at Brigham & Women's Hospital this 20<sup>th</sup> day of MAY, 2003.

Robert Sackstein MD, PhD. L.S.  
ROBERT SACKSTEIN

State of MASSACHUSETTS : ss.  
County of SUFFOLK :

Before me this 20<sup>th</sup> day of MAY, 2003, personally appeared ROBERT SACKSTEIN known to me to be the person whose name is subscribed to the foregoing Assignment and acknowledged that he executed the same as his free act and deed for the purposes therein contained.

Sofia Pena  
Notary Public  
My Commission Expires:

