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**RECORDATION FORM COVER SHEET
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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): Tracee Eidenschink 5-29-03 Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies): Name: SCIMED LIFE SYSTEMS, INC. Internal Address: Street Address: One SciMed Place City: Maple Grove State: MN Zip: 55311-1566 Additional name(s) & address(es) 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: May 9, 2003	

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) 10/375,689	B. Patent No.(s)
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Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed: Brendan C. Babcock Vidas, Arrett & Steinkraus, P.A. Suite 2000, 6109 Blue Circle Drive Minnetonka, MN 55343-9185	6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41): \$40.00 <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account 8. Deposit Account Number: 22-0350 (Attach duplicate of this page if paying by deposit account)
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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.

Brendan C. Babcock Reg. No. 50,705	 Signature	5/27/03 Date
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Total number of pages including cover sheet, attachments, and document:

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

ASSIGNMENT

WHEREAS, I(we), Tracee Eidenschink
residing at 2232 Pinto Drive, Wayzata, MN 55391
have invented and own the entire United States right, title and interest in an invention for:

ROTATING BALLOON EXPANDABLE SHEATH BIFURCATION DELIVERY

disclosed in my (our) application for United States Letter Patent filed:

- concurrently herewith
on February 27, 2003 and assigned Application No. 10/375,689; and

I (we) hereby authorize and request any attorney of Vidas, Arrett & Steinkraus, P.A., Suite
2000, 6109 Blue Circle Drive, Minnetonka, MN 55343-9185, to insert the filing date and application number of
said application above when known.

WHEREAS, SCIMED LIFE SYSTEMS, INC. ("Assignee"), a corporation organized and
existing under and by virtue of the laws of the State of Minnesota, and having its principal place of business at
One SciMed Place, Maple Grove, MN 55311-1566, is desirous of acquiring the entire right, title, and interest
in and to said invention, to said application for any and all countries, to any and all Letters Patent, and to any and
all Design Letters Patent of any and all countries which may be granted thereon;

NOW, THEREFORE, Be It Known that for good and valuable consideration, the receipt of all
of which is hereby acknowledged, I(we) hereby sell, assign, and transfer unto Assignee, its successors, and
assigns, the entire right, title and interest, legal and equitable, in and to said invention, to said application for any
and all countries, to any and all Letters Patent, and to any and all Design Letters Patent of any and all countries
which may be granted thereon; and the Commissioner of Patents and Trademarks is hereby authorized and
requested to issue all Letters Patent and all Design Letters Patent which may be granted to said invention to
Assignee.

Dated: 5-9-03

First Inventor's Signature:
First Inventor's Name:

Tracee Eidenschink
Tracee Eidenschink

Dated: _____

Second Inventor's Signature:
Second Inventor's Name:

Dated: _____

Third Inventor's Signature:
Third Inventor's Name:

Dated: _____

Fourth Inventor's Signature:
Fourth Inventor's Name:
