

Form PTO-1595 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002)		RECORDATION FORM COVER SHEET PATENTS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
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1. Name of conveying party(ies): Stephen C. Cary (04/16/2002) and Allison R. Sipe (04/27/2002)  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: UNIVERSITY OF DELAWARE Internal Address: _____ Street Address: _____  Office of the Vice Provost for Research 210 HULLIHEN HALL  City: Newark State: DE Zip: 19716 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: see Box 1, conveying parties					
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the new application is: _____ A. Patent Application No.(s): 10/474,621 B. Patent No.(s): _____ Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Christine M. Hansen CONNOLLY BOVE LODGE & HUTZ LLP Internal Address: Atty. Dkt.: UD 01-29 (131*261) Street Address: 1007 North Orange Street P.O. Box 2207  City: Wilmington State: DE Zip: 19899		6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41) \$ 40.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Authorized to be charged to credit card (Form 2036 enclosed) 8. Deposit account number: 03-2775 (Attach duplicate copy of this page if paying by deposit account)			
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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>  Christine M. Hansen - 40,634 Name of Person Signing  Christine Hansen Signature  March 30, 2004 Date  Total number of pages including cover sheet, attachments, and documents: 2					

CH \$40.00 032775 10474621

**ASSIGNMENT AND AGREEMENT**

For value received and intending to be legally bound, I, the undersigned inventor (Assignor), sell, assign and transfer to THE UNIVERSITY OF DELAWARE (Assignee), having a principal place of business at Newark, Delaware, and its successors, assigns and legal representatives, the entire right, title and interest in and to my invention relating to

**METHODS AND COMPOSITIONS FOR INHIBITING CELLULOLYTIC SYMBIONTS**

as disclosed and claimed in the PCT application filed on April 9, 2002, assigned Attorney Docket No. 131\*261, and all right, title and interest in and to every patent application filed or to be filed on said invention in any country, including the United States, including renewals, revivals, continuations, divisions and any substitute applications of said application, and any and all patents which may issue thereon, and any reissues and extensions of the same.

I authorize and request competent authorities to grant and issue any and all patents on said invention to said assignee or its successors, assigns and legal representatives, or to such nominees as said assignee may designate.

I agree that, when requested, I will, without charge to said assignee but at is expense, sign all papers, take all rightful oaths, and do all acts which may be necessary, desirable or convenient for securing and maintaining patents for said invention in any and all countries and for vesting title thereto in said assignee, its successors, assigns, legal representatives or nominees.

I covenant with said assignee, its successors, assigns and legal representatives, that the rights and property herein conveyed are free and clear of any encumbrance, and that I have full right to convey the same as herein expressed.

Signed at UNIV. of Waikato, NEW ZEALAND on this 16<sup>th</sup> day of April 2002.

Signature: S. Craig Cary

Inventor's Name: S Craig Cary  
9 Mc Intosh Court  
Lewes, DE 19958

Signed at INFORMAX INC. on this 27<sup>th</sup> day of April 2002.

Signature: AR Sipe

Inventor's Name: Alison R. Sipe  
895 Eleventh Street  
Boulder, CO 80302

PTO/SB/97 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)  
40.00

## Complete if Known

Application Number 10/474,621  
Filing Date October 10, 2003  
First Named Inventor Stephen C. Cary  
Examiner Name Not Yet Assigned  
Art Unit N/A  
Attorney Docket No. UD 01-29 (131\*261)

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 03-2775

Deposit Account Name Connolly Bove Lodge & Hutz LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 180	2005 80	Provisional filing fee	

**SUBTOTAL (1)** (\$)  
0.00

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	** =	Extra Claims	x	Fee from below	=	Fee Paid
Independent Claims	** =		x		=	
Multiple Dependent						

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1202 18	2202 9	Claims in excess of 20	
1201 88	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim. If not paid	
1204 88	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2)** (\$)  
0.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	40.00
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$)  
40.00

## SUBMITTED BY

Name (Print/Type) Christine M. Hansen

Registration No. (Attorney/Agent) 40,634

(Complete if applicable)

Telephone (302) 658-9141

Signature *Christine M. Hansen*

Date March 30, 2004

**FAX TRANSMISSION****DATE:** March 30, 2004**PTO IDENTIFIER:** **Application Number** 10/474,621  
**Patent Number****Inventor:** Stephen C. Cary et al.**MESSAGE TO:** USPTO PTAS System**FAX NUMBER:** (703) 306-5995**FROM:** CONNOLLY BOVE LODGE & HUTZ LLP  
Christine M. Hansen**PHONE:** (302) 658-9141**Attorney Dkt. #:** UD 01-29 (131\*261)**PAGES (Including Cover Sheet):** 5**CONTENTS:** Assignment (1 page);  
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