|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 10 - 15 - 2003 Docket No.: 13768.371 |                                                                                         |                               |                                                         |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------|--|
| FORM PTO-1595 (Modified)<br>(Rev. 03-01)<br>OMB No. 0651-0027 (exp.5/31/2002)<br>P08/REV03                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 10-10-24                             |                                                                                         | ET                            | U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office |  |
| Tab settings → → ▼                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1025742                              | 91                                                                                      | ▼                             | ▼ ▼                                                     |  |
| To the Director of the United States Patenta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                      |                                                                                         | attached origin               | nal documents or copy thereof.                          |  |
| 1. Name of conveying party(ies): Robert Michael Howard  OCT 07 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | M. DELLE                             | 2. Name and add Name: Micros Internal Addres                                            | soft Corporati                | , , ,                                                   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes 🛭 No                             |                                                                                         |                               |                                                         |  |
| 3. Nature of conveyance:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                      |                                                                                         |                               |                                                         |  |
| 🖾 Assignment 🗆 Merg                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ger                                  | Street Address                                                                          | S: One Micro                  | soft Way                                                |  |
| ☐ Security Agreement ☐ Char                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | nge of Name                          |                                                                                         |                               |                                                         |  |
| ☐ Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      | City: Redmond                                                                           | <u>t</u>                      | State: WA ZIP: 98052                                    |  |
| Execution Date: 10/2/2003                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      | Additional name(s)                                                                      | ) & address(es)               | attached? 🔲 Yes 🗵 No                                    |  |
| If this document is being filed together with a  A. Patent Application No.(s)  10/602,122  Additional Addition | onal numbers attach                  | B. Paten                                                                                |                               |                                                         |  |
| Name and address of party to whom correspondering document should be mailed:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | pondence                             | 6. Total number of                                                                      | of applications               | s and patents involved:                                 |  |
| Name: RICK D. NYDEGGER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      | 7. Total fee (37 C                                                                      | FR 3.41):                     | \$ 40.00                                                |  |
| Internal Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                      | Enclosed - Any excess or insufficiency should be credited or debited to deposit account |                               |                                                         |  |
| 02 FC:8021 40.00 DP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                      | _                                                                                       |                               | ed to deposit account                                   |  |
| Street Address: Workman Nydegger                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                      | 8. Deposit accou                                                                        | nt number:                    |                                                         |  |
| 1000 Eagle Gate Tower, 60 East South Temple                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                      | 23-3178                                                                                 |                               |                                                         |  |
| City: Salt Lake City State: UT ZIP: 84111 (Attach duplicate copy of this page if paying by deposit account)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                      |                                                                                         | if paying by deposit account) |                                                         |  |
| DO NOT USE THIS SPACE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                      |                                                                                         |                               |                                                         |  |
| <ol> <li>Statement and signature.</li> <li>To the best of my knowledge and belief, the<br/>of the original document.</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | foregoing informat                   | ion is true and cor                                                                     | rect and any                  | attached copy is a true copy                            |  |
| MICHAEL B. DODD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Mrelet                               | 0001                                                                                    |                               | October 7, 2003                                         |  |
| Name of Person Signing Signature Date  Total number of pages including cover sheet, attachments, and document:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                                                                         |                               |                                                         |  |

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| Inventorship                                |  |
|---------------------------------------------|--|
| Applicant                                   |  |
| Attorney's Docket No                        |  |
| MS Docket No.                               |  |
| Title: CENERAL DEPENDENCY MODEL FOR INVALID |  |

#### PATENT ASSIGNMENT

## PARTIES TO THE ASSIGNMENT

### Assignor(s):

Robert Michael Howard 11688 Bent Creek Trail Frisco, TX 75034

### Assignee:

Microsoft Corporation Corporation in the State of Washington One Microsoft Way Redmond, WA 98052

### **AGREEMENT**

WHEREAS, ASSIGNOR(S) (listed above) are inventor(s) of an invention entitled "GENERAL DEPENDENCY MODEL FOR INVALIDATING CACHE ENTRIES," as described and claimed in the specification forming part of an application for United States letters patent referenced above;

WHEREAS, Microsoft Corporation (hereinafter referred to as ASSIGNEE), a corporation of the State of Washington having a place of business at One Microsoft Way, Redmond, WA 98052, is desirous of acquiring the entire right, title and interest in and to the invention and in and to any letters patent that may be granted therefore in the United States and in any and all foreign countries;

NOW, THEREFORE, in exchange for good and valuable consideration, the receipt of which is hereby acknowledged, ASSIGNOR(S) hereby sell, assign and transfer unto ASSIGNEE, the entire right, title and interest in and to said invention, said application and any and all

PATENT REEL: 014578 FRAME: 0215

Attorney Docket No. 13768.371 MS Docket No. 303420.01

letters patent which may be granted for said invention in the United States of America and its territorial possessions and in any and all foreign countries, and in any and all divisions, reissues and continuations thereof, including the right to file foreign applications directly in the name of ASSIGNEE and to claim priority rights deriving from said United States application to which said foreign applications are entitled by virtue of international convention, treaty or otherwise, said invention, application and all letters patent on said invention to be held and enjoyed by ASSIGNEE and its successors and assigns for their use and benefit and of their successors and assigns as fully and entirely as the same would have been held and enjoyed by ASSIGNOR(S) had this assignment, transfer and sale not been made. ASSIGNOR(S) hereby authorize and request the Commissioner of Patents and Trademarks to issue all letters patent on said invention to ASSIGNEE. ASSIGNOR(S) agree to execute all instruments and documents required for the making and prosecution of applications for United States and foreign letters patent on said invention, for litigation regarding said letters patent, or for the purpose of protecting title to said invention or letters patent therefore.

Date

Kobert Michael Howard

**RECORDED: 10/07/2003** 

REEL: 014578 FRAME: 0216