

# PATENT ASSIGNMENT RECORDATION COVER SHEET

**To the Commissioner for Patents:**

**Please record the attached original document or copy thereof.**

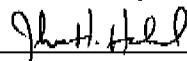
<p>1. Name of conveying party(ies):</p> <p><b>Jörg Vortkort</b></p> <p>Additional names of conveying party(ies) attached?  <input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies)</p> <p><b>PolyOne Corporation  PolyOne Center  33587 Walker Road  Avon Lake, Ohio 44012  UNITED STATES OF AMERICA</b></p>
<p>3. Nature of conveyance:   <input checked="" type="checkbox"/> Assignment</p> <p>Execution Date(s): <b>April 22, 2004</b></p>	
<p>4. Application number or patent number:</p> <p><input type="checkbox"/> This document is being filed with a <b>new</b> patent application on:</p> <p><input checked="" type="checkbox"/> This document is to be recorded against the following patent application(s) or patent(s): Application No. <b>10/782,753</b></p>	
<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p><b>John H. Hornickel  PolyOne Corporation  PolyOne Center  33587 Walker Road  Avon Lake, Ohio 44012</b></p> <p>FAX NO. 440-930-1179</p>	<p>6. Total number of applications and patents involved:</p> <div style="text-align: center; border: 1px solid black; width: 50px; margin: 10px auto;">1</div> <p>7. Total fee (37 CFR 3.41) . . . . \$40</p> <p><input type="checkbox"/> Previously submitted      <input type="checkbox"/> Enclosed</p> <p><input checked="" type="checkbox"/> Please charge Deposit Account No. 07-1077.</p> <p>8. Please charge any additional fees or credit any overpayment to Deposit Account No. 07-1077.</p>

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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.

John H. Hornickel, Reg. No. 29,393

Printed Name of Attorney

  
Signature

June 3, 2004

Date

Total number of pages including cover sheet, attachments, and document:

2

(Record Firm) Mail documents to be recorded with required cover sheet information to: Mail Stop Assignment Recordation Services, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450  
Fax to (703) 306-5995

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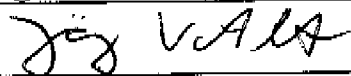
**Assignment**

I, alone or together with others listed below, have made a certain invention described and claimed in an application for United States Letters Patent, signed by me with a Declaration of Inventorship, such application entitled:

**THERMOPLASTIC VULCANIZATE WITH IMPROVED SURFACE PROPERTIES**

Now, for good and valuable consideration, the receipt of which is acknowledged, I hereby sell, assign, and transfer unto **POLYONE CORPORATION**, an **Ohio** corporation, having its principal place of business at **PolyOne Center, 33587 Walker Road, Avon Lake, Ohio 44012**, its successors, legal representatives and assigns, the entire right, title and interest in, to an under such certain invention and application and any letters patent of the United States which may be issued thereon, together with all reissues or reexaminations of said letters patent, all divisions, continuations, and common subject matter of continuations-in-part of said application, and all application and patent rights for such certain invention in all countries other than the United States of America; and I further agree, alone or together with others listed below, to execute all further documents (paper or electronic) and do all further acts appropriate to fully vest in **POLYONE CORPORATION** the rights herein conveyed.

I authorize PolyOne Corporation to insert into this Assignment the filing date or the Serial Number of the application, or both, when known prior to recordation of this Assignment.

Inventor Name	Signature	Date
Jörg VORTKORT		22.04.04
Witness Name	Signature	Date

Inventor Name	Signature	Date
Jörg WALLACH		
Witness Name	Signature	Date

Inventor Name	Signature	Date
Witness Name	Signature	Date