

FORM PTO-1619A
Expires 06/30/99
OMB 0651-0027

01-28-2004

U.S. Department of Commerce
Patent and Trademark Office
PATENT



102655535

**RECORDATION FORM COVER SHEET
PATENTS ONLY**

Docket No.: RRA08US

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- ☒ New
☐ Resubmission (Non-Recordation)
Document ID#
☐ Correction of PTO Error
Reel # Frame #
☐ Corrective Document
Reel # Frame #

Conveyance Type

- ☒ Assignment ☐ Security Agreement
☐ License ☐ Change of Name
☐ Merger ☐ Other
U.S. Government
(For Use ONLY by U.S. Government Agencies)
☐ Departmental File ☐ Secret File

031366 U.S. PTO
10760196

012104

Conveying Party(ies)

- ☐ Mark if additional names of conveying parties attached
Name (line 1) Execution Date
Month Day Year
01 12 2004

Name (line 2)

Second Party

Name (line 1) Execution Date
Month Day Year

Name (line 2)

10760196

Receiving Party

- ☐ Mark if additional names of receiving parties attached

Name (line 1)

Name (line 2)

☐ If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

Address (line 1)

Address (line 2)

Address (line 3) City NSW, Australia State/Country 2041 Zip Code

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

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

01/23/2004 JBALIAN 00000016 10760196

02 FC:8021

40.00 OP

PATENT
REEL: 014911 FRAME: 0386

Correspondent Name and Address

Country,

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

#

Application Number(s) or Patent Number(s)

☐ Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

Patent Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor.

Month Day Year

Patent Cooperation Treaty (PCT)

Enter PCT application number
only if a U.S. Application Number
has not been assigned.

PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>
PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>

Number of Properties

Enter the total number of properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment:
Deposit Account

Enclosed ☒

Deposit Account ☐

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes ☐ No ☐

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. Charges to deposit account are authorized, as indicated herein.

Kia Silverbrook



January 12, 2004

Name of Person Signing

Signature

Date

ASSIGNMENT OF APPLICATION

Docket Number (Optional)
RRA08US

Whereas, I, Kia Silverbrook of 393 Darling Street
Balmain, NSW 2041, Australia, hereafter
referred to as applicant, have invented certain new and useful improvements in _____
Inkjet Printer Cartridge with a Compressed Air Port

☐ for which an application for a United States Patent was filed on _____,
Application Number _____/_____.


☒ for which an application for a United States Patent was executed on January 12, 2004, and

Whereas, SILVERBROOK RESEARCH PTY. LTD. of Balmain, New South Wales, Australia herein referred to
"assignee" whose post office address is 393 Darling Street, Balmain, NSW 2041, Australia is de-
sirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of one dollars (\$ 1.00), the receipt whereof is ac-
knowledgeed, and other good and valuable consideration, I, the applicant, by these presents do sell, assign
and transfer unto said assignee the full and exclusive right to the said invention in the United States/and the
entire right, title and interest in and to any and all Patents which may be granted therefor in the United States/

I hereby authorize and request the Commissioner of Patents and Trademarks to issue said United States
Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof;
and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may
be granted, as fully and entirely as the same would have been held by me had this assignment and sale not
been made.

Executed this 12th day of January, ~~19~~ 2004,
at Balmain, New South Wales, Australia.


(Signature)

State of _____) SS:
County of _____)

Before me personally appeared said _____
and acknowledged the foregoing instrument to be his free act and deed this _____
day of _____, 19____.

Seal

(Notary Public)

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any
comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office,
Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks,
Washington, DC 20231.