Form PTO-1595 RECC	U.S. DEPARTMENT OF COMMERCE	
(Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)	U.S. Patent and Trademark Office HDP Docket No. 9050-00008/USB	
Tab settings ⇔⇔⇔ ▼ 102776	3196 <u>▼ ▼ ▼</u>	
To the Honorable Commissioner of Patents and Trademarks:	Please Record the attached original documents or copy thereof.	
Name of conveying party(ies):  Charles O. Edwards	2. Name and address of receiving party(ies)	
David Albertalli Juli 1 7 2004 Juli 1 7 2004	Name: Litrex Corporation	
George Fellingham	Internal Address: 6670 Owens Drive	
Additional name of conveying party(ies) attached?   Yes   No		
3. Nature of conveyance:	Street Address:	
☐ Security Agreement ☐ Change of Name	City: Pleasanton State: CA Zip: 94588	
Other	Additional Name(s) & address(es) attached? ☐ Yes ☐ No	
Execution Date: <u>12/4/03, 12/4/03, 12/4/03, 12/5/03</u>		
Additional numbers att	ached?  Yes No	
<ol> <li>Name and address of party to whom correspondence concerning this document should be mailed;</li> </ol>	6. Total number of applications and patents involved: 1	
Name: Robert M. Siminski Reg. No. 36,007	7. Total fee (37 CFR 3.41) \$ 40.00	
Internal Address: Harness, Dickey & Pierce, P.L.C.	☑ Enclosed	
	Authorized to be charged to deposit account	
Street Address: P.O. Box 828	8. The Commissioner is hereby authorized to charge any additional fees that may be required or credit any overpayments to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.	
City: Bloomfield Hills State: MI Zip: 48303	(Attach duplicate copy of this page if paying by deposit account)	
DO NOT USE THIS SPACE		
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.  Robert M. Siminski  June 17, 2004		
	Signature Date	
Total number of pages including cover sheet, attachments, and documents:		
Mail documents to be recorded with required cover sheet information to:  Commissioner of Patents & Trademarks, Box Assignments		
Washington, D.C. 20231		

## **ASSIGNMENT**

Atty. Docket No. 9050-008/USB

WHEREAS, the undersigned, hereinafter referred to collectively as Assignor, has invented:

## WAVEFORM GENERATOR FOR MICRODEPOSITION CONTROL SYSTEM

SEE ATTACHED NOTARIAL ACKNOWLEDGEMENT

David ALBERTALLI

Dec /4/03

James MIDDLETON

12/4/03 Date:

_ GA.	keld	
George F	ELLIN	GHAM

5 Dcc 2003

Attorney Docket No. 9050-008/USB

Page 2 of 2

Assignment

SEE ATTACHED NOTARIAL ACKNOWLEDGEMENT

### CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California  County of	ss.
	- ) <i>Q</i>
On 12-4-03 before me,  personally appeared Charles ©	JOELLEN K. KING No Fuy Public")
personally appeared	·Edwards
	Name(s) of Signer(s)
	<ul> <li>personally known to me</li> <li>proved to me on the basis of satisfactory evidence</li> </ul>
JOELLEN K. KING COMMISSION 1260666 NOTARY PUBLIC-CALIFORMA ALAMEDA COUNTY	to be the person(s) whose name(s) is/arc subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/ber/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), of the entity upon behalf of which the person(s) acted, executed the instrument.
My commission exps April 14, 2004	DELLE K Kung  Signature of Notary Public
OPT.	IONAL
Though the information below is not required by law, it may pro	ve valuable to persons relying on the document and could preven
	ent of this form to another document.
Description of Attached Document	11 32 4 2 2 4 4 5
Title or Type of Document: #55 iqnmen	14/ Waveform generator
Document Date: 12-4-03	Number of Pages: 5
Signer(s) Other Than Named Above: David  George Felling Lam	albertalli James Middles
Capacity(ies) Claimed by Signer	V
Signer's Name: Charles O. Edu	vards
□ Individual □ Corporate Officer — Title(s):	right thumbering of signer Top of thumb here
☐ Partner — ☐ Limited ☐ General ☐ Attorney-in-Fact	
<ul><li>□ Trustee</li><li>□ Guardian or Conservator</li></ul>	
Signer Is Representing: LITRER C	$\mathfrak{n}_{\rho}$ .

#### CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California County of Alameda	ss.
County of Wameda	_ <b>J</b>
0 4 2	105115111 min Notes Political
On /2-4-b) before me,	JOELIEN K. KING Not Any Pub  Name and Title of Officer (e.g., Jane Doe, Notary Public)
personally appeared <u>Jawa Wl</u>	Ver Falle Name(s) of Signer(s)
	personally known to me
	proved to me on the basis of satisfactor
	evidence
	to be the person(s) whose name(s) is/ar
	subscribed to the within instrument an
	acknowledged to me that he/sbe/they execute
	the same in his/h <del>or/their</del> authorize capacity(ies), and that by his/h <del>or/the</del>
JOELLEN K. KING	signature(s) on the instrument the person(s), of
COMMISSION 1260666	the entity upon behalf of which the person
NOTARY PUBLIC-CALIFORNIA ALAMEDA COUNTY	acted, executed the instrument.
My commission exps April 14, 2004	WITNESS my hand and official seal.
	Josellen K. Kung
	Signature of Notary Public
	-
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	ent of this form to another document.
Description of Attached Document	
Title or Type of Deciment Assian mea	6) Harredon GAMONATON
Title or Type of Document: Assign men	- June Gum -
Document Date: 12·4-03	Number of Pages: 5
Signer/s) Other Than Named Above: Chanl	es O. Edwards, James Mide
and George Fellingham	n
Capacity(ies) Claimed by Signer	
	Lalli
Signer's Name: Javia Ullin	RIGHT THUMBPRIN
☐ Individual	OF SIGNER Top of thumb here
Corporate Officer — Title(s): V. P EM	ginuring / CIO
<ul><li>☐ Partner — ☐ Limited ☐ General</li><li>☐ Attorney-in-Fact</li></ul>	
_ Attorney-in-⊬act _j Trustee	
Guardian or Conservator	
Other:	
Signer Is Representing: LITREX COTA	2 .
Signor to reproducting.	

# **CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

State of California  County of	ss.
	· · · · · · · · · · · · · · · · · · ·
On	JOELLEN K. KING, Wo Fary Public')  Name and Title of Officer (e.g., Jane Doe, Notary Public')
personally appeared	leddleton
	Name(s) of Signer(s)  personally known to me
	proved to me on the basis of satisfactor evidence
JOELLEN K. KING COMMISSION 1260666 NOTARY PUBLIC-CALIFORNIA	to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), of the entity upon behalf of which the person(s) acted, executed the instrument.
ALAMEDA COUNTY My commission exps April 14, 2004	WITNESS my hand and official seal.
my continueson one opin 14, 2004	DEllen K. King
	Signature of Notary Public
	V
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	ent of this form to another document.
Description of Attached Document	
Title or Type of Document: Assignment	- Wavedown generator
Document Date: 12-4-03	
	Number of Pages:
Signer(s) Other Than Named Above: <u>Charlu</u> & Geoge Fellingham.	o O. Edwards, David Albe
Capacity(ies) Claimed by Signer	
7 00.410	a tru
Signer's Name: Vames Muddle	RIGHT THUMBPRINT
Individual	OF SIGNER Top of thumb here
Corporate Officer — Title(s):	
<ul><li>□ Partner — □ Limited □ General</li><li>□ Attorney-in-Fact</li></ul>	
Trustee	
☐ Guardian or Conservator	
2 Other: Manger - INKJET S	4STem Integration
Signer Is Representing: LITREA Con	20.
	<del></del>

STATE OF CALIFORNIA COUNTY OF SANTA CLARA		
On 12/5,200 3 before me, Patience Anne Starnes, Notary Public, personally appeared George Herrie Lelling han		
Personally known to me orprove	and to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized	
PATIENCE ANNE STARNES COMM. NO. 1428932 M NOTARY PUBLIC - CALIFORNIA S SANTA CLARA COUNTY COMM. EXPIRES JULY 29, 2007	capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity on behalf of which the person(s) acted, executed the instrument.  WITNESS my hand and official/seal.  Paylence Anne Starnes, Notary Public	
Although the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.		
CAPACITY CLAIMED BY CUSTODIAN	DESCRIPTION OF ATTACHED DOCUMENT	
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ATTORNEY IN FACT	,	
GUARDIAN/CONSERVATOR OTHER	DATE OF DOCUMENT	
SIGNER IS REPRESENTING: NAME(S) OF PERSON(S) OR ENTITY(IES)	SIGNER(S) OTHER THAN NAMED ABOVE	