



9.7.04

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To the Commissioner of Patents and Trademarks: Please record the attached original or copy thereof.

Name of conveying party(ies):  Carl D. Wahlstrand William C. Phillips Robert M. Skime  Execution Date (Month/Day/Year) 08/30/04 08/03/04 08/30/04  Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name and address of receiving party(ies):  Medtronic, Inc. 710 Medtronic Parkway Minneapolis, MN 55432  Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> Other:  <input type="checkbox"/> Merger <input type="checkbox"/> Change of Name	Submission Type: <input checked="" type="checkbox"/> New <input type="checkbox"/> Resubmission (Non-Recordation): Document ID # <input type="checkbox"/> Correction of PTO Error: Reel # ___ Frame # <input type="checkbox"/> Corrective Document: Reel # ___ Frame #
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This document is being filed with a new patent application on \_\_\_\_.

This document is to be recorded against the following patent application or patent:

Patent Application No.(s)  10/835,548	Patent No.(s)    Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Name and address of party to whom correspondence concerning document should be mailed:  Name: Jason D. Kelly Address: Shumaker & Sieffert, P.A. 8425 Seasons Parkway, Suite 105 St. Paul, MN 55125	Total number of applications and patents involved: 1  Total fee (37 CFR 3.41): \$40.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account  Please charge any additional fees or credit any overpayments to our Deposit account number: 50-1778
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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.

Jason D. Kelly Name of Person Signing Reg. No. 54,213	 Signature	September 2, 2004 Date
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09/08/2004 LMUELLER 00000059 501778 10835548 Total number of pages of the attached conveyance document including any attachments: 5

01 EC:8021 40.00 DA

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ASSIGNMENT

For valuable consideration, we, Carl D. Wahlstrand of 6347 Langer Lane, Lino Lakes, MN 55038, William C. Phillips of 8941 Cambridge Court, Brooklyn Park, MN 55443 and Robert M. Skime of 2357 132<sup>nd</sup> Avenue NW, Coon Rapids, MN 55448, hereby assign to: Medtronic, Inc., having a place of business at: 710 Medtronic Parkway, Minneapolis, MN 55432; and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are the subject of an application for United States Patent signed by us, entitled HEADSET RECHARGER FOR CRANIALLY IMPLANTABLE MEDICAL DEVICES, filed April 29, 2004, and assigned U.S. Serial Number 10/835,548; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, including any and all extensions, divisions, continuations, continuations-in-part or reissues thereof, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and we agree for ourselves and our respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

Date: 30 AUG 04

Carl D. Wahlstrand  
Carl D. Wahlstrand

State of MINNESOTA )  
County of ANOKA ) ss:

On this 30<sup>th</sup> day of AUGUST, 2004, before me, HELEN M. TERWAY, Notary Public, personally appeared Carl D. Wahlstrand personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Helen M. Terway  
Signature of Notary Public  
My Commission Expires: 01/31/07

Date: \_\_\_\_\_

\_\_\_\_\_  
William C. Phillips

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) ss:

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_, Notary Public, personally appeared William C. Phillips personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

\_\_\_\_\_  
Signature of Notary Public  
My Commission Expires:

Date: 30 Aug 2004

Robert M. Skime  
Robert M. Skime

State of MINNESOTA )  
                                  ) ss:  
County of ANOKA )

On this 30<sup>th</sup> day of AUGUST, 2004, before me, HELEN M. TERWAY,  
Notary Public, personally appeared Robert M. Skime personally known to me (or proved to me on the  
basis of satisfactory evidence) to be the person(s) whose name is/are subscribed to the within instrument  
and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that  
by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s)  
acted, executed the instrument.

WITNESS my hand and official seal.



Helen M. Terway  
Signature of Notary Public  
My Commission Expires: 01/31/07

ASSIGNMENT

For valuable consideration, we, Carl D. Wahlstrand of 6347 Langer Lane, Lino Lakes, MN 55038, William C. Phillips of 8941 Cambridge Court, Brooklyn Park, MN 55443 and Robert M. Skime of 2357 132<sup>nd</sup> Avenue NW, Coon Rapids, MN 55448, hereby assign to: Medtronic, Inc., having a place of business at: 710 Medtronic Parkway, Minneapolis, MN 55432; and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are the subject of an application for United States Patent signed by us, entitled HEADSET RECHARGER FOR CRANIALLY IMPLANTABLE MEDICAL DEVICES, filed April 29, 2004, and assigned U.S. Serial Number 10/835,548; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, including any and all extensions, divisions, continuations, continuations-in-part or reissues thereof, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and we agree for ourselves and our respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

Date: \_\_\_\_\_

Carl D. Wahlstrand

State of \_\_\_\_\_ )  
  ) ss:  
County of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_,  
Notary Public, personally appeared Carl D. Wahlstrand personally known to me (or proved to me on the  
basis of satisfactory evidence) to be the person(s) whose name is/are subscribed to the within instrument  
and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that  
by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s)  
acted, executed the instrument.

WITNESS my hand and official seal.

\_\_\_\_\_  
Signature of Notary Public  
My Commission Expires:

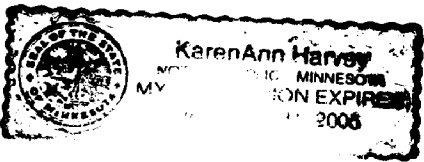
Date: 3 - Aug - 2004

William C. Phillips  
\_\_\_\_\_  
William C. Phillips

State of MN )  
  ) ss:  
County of Anoka )

On this 3 day of August, 2003, before me, KarenAnn Harvey  
Notary Public, personally appeared William C. Phillips personally known to me (or proved to me on the  
basis of satisfactory evidence) to be the person(s) whose name is/are subscribed to the within instrument  
and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that  
by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s)  
acted, executed the instrument.

WITNESS my hand and official seal.



KarenAnn Harvey  
\_\_\_\_\_  
Signature of Notary Public  
My Commission Expires: January 31, 2005

