

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Quality Assured Enterprises, Inc.	04/01/2005
RECEIVING PARTY DATA	
Name:	Joseph D. Franko Sr.
Street Address:	15411 Terrace Road Northeast
City:	Ham Lake
State/Country:	MINNESOTA
Postal Code:	55304
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	10194755
CORRESPONDENCE DATA	
Fax Number:	(952)939-2058
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	952-939-2058
Email:	kroloff@qal.com
Correspondent Name:	Walter K. (Kevin) Roloff
Address Line 1:	Quality Assured Enterprises, Inc.
Address Line 2:	11563 K-Tel Drive
Address Line 4:	Minnetonka, MINNESOTA 55343
NAME OF SUBMITTER:	Walter K. Roloff
Total Attachments: 2	
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OP \$40.00 10194755

500025830

PATENT
REEL: 015853 FRAME: 0031

**RECORDATION FORM COVER SHEET
PATENTS ONLY**

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)

Quality Assured Enterprises, Inc.

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance/Execution Date(s):

Execution Date(s) 4-01-2005

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Joint Research Agreement
☐ Government Interest Assignment
☐ Executive Order 9424, Confirmatory License
☐ Other _____

2. Name and address of receiving party(ies)

Name: Joseph D. Franko, Sr.

Internal Address: _____

Street Address: 15411 Terrace Road Northeast

City: Ham Lake

State: Minnesota

Country: U.S.A. Zip: 55304

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application or patent number(s):

☐ This document is being filed together with a new application.

A. Patent Application No.(s)

10 / 194,755

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address to whom correspondence concerning document should be mailed:

Name: Walter K. Roloff

Internal Address: Intellectual Property Counsel,

Quality Assured Label, Inc.

Street Address: 11563 K-Tel Drive

City: Minnetonka

State: Minnesota Zip: 55343

Phone Number: (952) 939-2058

Fax Number: (952) 939-2092

Email Address: _____

6. Total number of applications and patents involved: One (1)

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

- ☒ Authorized to be charged by credit card
☐ Authorized to be charged to deposit account
☐ Enclosed
☐ None required (government interest not affecting title)

8. Payment Information

a. Credit Card Last 4 Numbers 0509

Expiration Date 05 / 05

b. Deposit Account Number _____

Authorized User Name _____

9. Signature:

W. K. Roloff

Signature

4-01-2005

Date

Walter K. Roloff

Name of Person Signing

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

2

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

ASSIGNMENT OF APPLICATION

Docket Number (Optional)

QAL-40

Whereas, Quality Assured Enterprises, Inc., of Minnetonka, Minnesota, hereafter

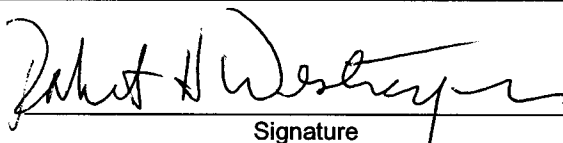
referred to as "Prior Assignee", had previously been assigned all right, title, and interest in and to

"LABEL HAVING AN INTEGRAL EXTENSION TUBE AND METHOD OF MANUFACTURE THEREOF"☒ for which an application for a United States Patent was filed on July 12, 2002Application Number 10 / 194,755.☐ for which an application for a United States Patent was executed on _____, andWhereas, Joseph D. Franko, Sr. of Ham Lake, Minnesota here referred

to as "inventor-prior assignor" whose mailing address is 15411 Terrace Road Northeast, Ham Lake, MN, 55304, is desirous of re-acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of ten dollars (\$ 10.00), the receipt whereof is acknowledged, and other good and valuable consideration, the Prior Assignee, by these presents do sell, assign and transfer back unto said inventor-prior assignor the full and exclusive right to the said invention in the United States and the entire rights, title and interest in and to any and all Patents which may be granted therefore in the United States. It hereby authorizes and requests the Director of the U.S. Patent and Trademark Office to issue said Patents to said inventor-prior assignor, 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 Patents may be granted, as fully and entirely as the same would have been held by said Prior Assignee had this return assignment and sale not been made.

Executed this 1 day of April, 20 05
at MINNETONKA, MN.



Signature

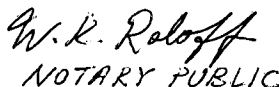
State of MinnesotaRobert H. Westmeyer

SS:

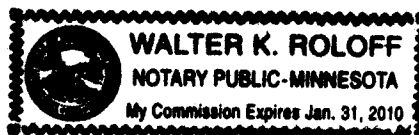
Printed Name/Registration No., if applicable

County of HennepinBefore me personally appeared said Robert H. Westmeyer, President of said Prior Assignee,and acknowledged the foregoing instrument to be his free act and deed this 1stday of April, 20 05.

Seal



NOTARY PUBLIC



Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, See below*.

☐ Total of _____ forms are submitted.

This form offers a sample or suggested format for an assignment document. This sample form is not an OMB officially approved form.

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