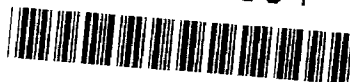


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4. Application or patent number(s):

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A. Patent Application No.(s)

09/582,003

B. Patent No.(s)

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

Name: Orum & Roth

Internal Address: _____

Street Address: 53 West Jackson Blvd.

Suite 1616

City: Chicago

State: IL Zip: 60604

Phone Number: (312) 922-6262

Fax Number: (312) 922-7747

Email Address: email@orumroth.com

6. Total number of applications and patents involved:

1

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Correspondent Name and Address Name <u>Orum & Roth</u> Address (line 1) <u>53 West Jackson Boulevard</u> Address (line 2) _____ Address (line 3) <u>Chicago, Illinois 60604</u>		Area Code and Telephone Number <u>312.922.6262</u>	
Application Number or Patent Number Patent Application Number <u>09/582003</u> Patent Number _____			
If this document is being filed together with a <u>new</u> Patent Application, enter the date the patent application was signed by the first named executing inventor.			
Fee Amount Method of Payment: <input type="checkbox"/> Enclosed <input type="checkbox"/> Deposit Account Deposit Account Number _____ Authorization to charge additional fees: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Fee Amount for Properties Listed (37 CFR 3.41) \$ <u>40.00</u> # <u>4-2219</u>	
Statement and Signature <i>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.</i> <u>Catherine L. Gemrich</u> <u>Catherine L. Gemrich</u> <u>4/8/2004</u> Name of Person Signing Signature Date			

Attorney Docket Number: 11412
F166 (Orum & Roth)

E-1-92

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To the Honorable Commissioner of Patents and

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Rolf Larsson

9.18.02

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Name: ESAB AB

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SE-402 77

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Execution Date:

4. Application number(s) or Patent number(s): 09/582003

If this document is being filed together with a new application, the execution date of the application:

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

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

ORUM & ROTH
53 West Jackson Boulevard
Suite 1616
Chicago, Illinois 606046. Total number of applications and patents involved: 17. Total fee (37 CFR 3.41). \$ 40.00☒ Enclosed☐ Authorized to be charged to deposit account☐ Payment submitted previously (See attached letter)

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Catherine L. Gemrich

Name of Person Signing

Catherine L. Gemrich

Signature

08/14/2003

Date

Attorney Docket Number: 11412
F166 (Orum & Roth)

ASSIGNMENT OF U.S. PATENT APPLICATION

Assignor
Full Name
and Address

Rolf LARSSON

Bäverstigen 14, SE-695 31 LAXÅ, Sweden

hereby sell, assign and transfer to

Assignee
Name and
Address

ESAB AB, P.O. Box 8004, SE-402 77 GÖTEBORG, Sweden

(hereinafter called the Assignee) the entire right, title, and interest in and to any and all improvements which are disclosed in the Application for United States Letters Patent entitled

Title of
Invention

WELDING APPARATUS

which application was

Complete
either
a) or b)

a) executed by the undersigned on the day of , 19

b) filed on the day of , 19

Serial No

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It is hereby authorized and requested that the Commissioner of Patents issue any and all of said Letters Patent, when granted, to said Assignee.

Further, it is agreed that, when requested, without charge to but at the expense of said Assignee, the undersigned will execute all divisional, continuing, substitute, renewal, and reissue patent applications; execute all rightful other papers; and generally do everything possible which said Assignee shall consider desirable for aiding in securing and maintaining proper patent protection.

Date

Signed at

Laxå, Sweden

this day of

August

2000

Assignor
Representative
Signature(s)

ASSIGNOR(S):

Rolf Larsson

WITNESSES:

Witnesses Full
Signature(s)

Agneta Andersson / Stefan Berglund /

ASSIGNMENT OF U.S. PATENT APPLICATION

Assignor
Full Name
and Address

Rolf LARSSON

Bäverstigen 14, SE-695 31 LAXÅ, Sweden

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Name and
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Date

Signed at Laxå, Sweden

this 15 day of August 2000

Assignor
Representative
Signature(s)

ASSIGNOR(S):

Rolf Larsson
Rolf Larsson

WITNESSES:

Witnesses' Full
Signature(s)

Agneta Andersson / Agneta Andersson
Stefan Berglund / Stefan Berglund

ASSIGNMENT OF U.S. PATENT APPLICATION

Assignor
Full Name
and Address

Rolf LARSSON

Bäverstigen 14, SE-695 31 LAXÅ, Sweden

hereby sell, assign and transfer to

Assignee
Name and
Address

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Representative
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ASSIGNOR(S):

Rolf Larsson

WITNESSES:

Witnesses' Full
Signature(s)

Agneta Andersson / Stefan Berglund /