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FORM PTO-1595  
(Rev. 6-93)



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

12 13 254

1. Name of conveying party(ies):

Bruce R. Hill

2. Name and address of receiving party(ies)

Name: TRW Vehicle Safety Systems Inc.

Internal Address:

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

3. Nature of conveyance:

- Assignment  Merger
- Security Agreement  Change of Name
- Other \_\_\_\_\_

Execution Date: December 7, 2004

Street Address: 4505 West 26 Mile Road

City: Washington State: MI Zip: 48094

Additional name(s) and address(es) attached?  Yes  No

22141 U.S. PTO  
11/010963



4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is December 7, 2004

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:

Name: THOMAS L. TAROLLI, ESQ.

Internal Address: Tarolli, Sundheim, Covell,

Tummino & Szabo L.L.P.

1111 Leader Building

Street Address: 526 Superior Avenue

City: Cleveland State: Ohio Zip: 44114-1400

6. Total number of applications and patents involved: 1

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

- Enclosed
- Authorized to be charged to deposit account.

8. Deposit Account No.

20-0090

(Attach duplicate copy of this page if paying by deposit account)

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9. 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

THOMAS L. TAROLLI  
Name of Person Signing  
Reg. No. 20,177

*Thomas Tarolli*  
Signature

12-13-04  
Date

Total number of pages including cover sheet, attachments, and document: 2

Mail Documents to be recorded with required cover sheet information to:  
Commissioner of Patents & Trademarks, Box Assignments  
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