

PATENT ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	JUDGEMENT
CONVEYING PARTY DATA	
Name	Execution Date
Darrell Kelsoe	01/08/2003
RECEIVING PARTY DATA	
Name:	Michael Niswonger
Street Address:	1829 Westridge Drive
City:	Cape Girardeau
State/Country:	MISSOURI
Postal Code:	63701
PROPERTY NUMBERS Total: 3	
Property Type	Number
Application Number:	09885642
Application Number:	10274057
Application Number:	60213198
CORRESPONDENCE DATA	
Fax Number:	(573)335-3064
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Email:	finres@excite.com
Correspondent Name:	Michael A. Niswonger
Address Line 1:	1829 Westridge Drive
Address Line 4:	Cape Girardeau, MISSOURI 63701
NAME OF SUBMITTER:	Michael A. Niswonger
Total Attachments: 3 source=usptokelsoe1#page1.tif source=usptokelsoe1#page2.tif source=usptokelsoe1#page3.tif	

OP \$120.00 09885642

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

United States Patent and Trademark Office

Credit Card Payment Form

Please Read Instructions before Completing this Form

Credit Card Information

Credit Card Type: Visa MasterCard American Express Discover

Credit Card Account #: 4317 9516 4501 5961

Credit Card Expiration Date: 01/08

Name as it Appears on Credit Card: Lloyd T Niswonger

Payment Amount: \$ (US Dollars): 120.00 (one hundred twenty dollars)

Cardholder Signature: *Lloyd T Niswonger* Date: *June 21, 2005*

Refund Policy: The Office may refund a fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The office will not refund amounts of \$25.00 or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR § 1.26). Refund of a fee paid by credit card will be issued as a credit to the credit card account to which the fee was charged.

Service Charge: There is a \$50.00 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR § 1.21 (m)).

Credit Card Billing Address

Street Address 1: 1829 Westridge drive

Street Address 2:

City: Cape Girardeau

State/Province: Missouri

Zip/Postal Code: 63701

Country: USA

Daytime Phone #: 573-335-3297

Fax #: 573-335-3064

Request and Payment Information

Description of Request and Payment information:

<input type="checkbox"/> Patent Fee	<input type="checkbox"/> Patent Maintenance Fee	<input type="checkbox"/> Trademark Fee	<input checked="" type="checkbox"/> Other Fee
Application No. 09/885,642	Application No. 10/274,057	Application No. 60/213,198	IDON Customer No.
Patent No.	Patent No.	Registration No.	
Attorney Docket No.		Identify or Describe Mark	

If the cardholder includes a credit card number on any form or document other than the Credit Card Payment Form, the United States Patent and Trademark Office will not be liable in the event that the credit card number is not in the public knowledge.

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)

DARRELL KELSOE
FOSSIL ROCK COMPANY

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

2. Name and address of receiving party(ies)

Name: MICHAEL A. NISWONGER

Internal Address: _____

Street Address: 1829 WESTRIDGE DRIVE

City: CAPE GIRARDEAU

State: MISSOURI

Country: USA Zip: 63701

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

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

Execution Date(s) January 8, 2003

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

4. Application or patent number(s):

This document is being filed together with a new application.

A. Patent Application No.(s)

09/885,642 10/274,057 60/213,198

B. Patent No.(s)

Additional numbers attached? Yes No

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

Name: MICHAEL A. NISWONGER

Internal Address: _____

Street Address: 1829 WESTRIDGE DRIVE

City: CAPE GIRARDEAU

State: MISSOURI Zip: 63701

Phone Number: 573-335-3297

Fax Number: 573-335-3064

Email Address: finres@excite.com

6. Total number of applications and patents involved: 3 (three)

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 120.00

- 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 5961
Expiration Date 01/08

b. Deposit Account Number _____

Authorized User Name _____

9. Signature:


Signature

06/21/2005
Date

MICHAEL A. NISWONGER
Name of Person Signing

Total number of pages including cover sheet, attachments, and documents: 4



Judge or Division: IV	Case Number: 02cv736112
Plaintiff(s)/Petitioner(s): MICHAEL A NISWONGER	
vs.	
Defendant(s)/Respondent(s): FOSSIL ROCK COMPANY DARRELL KELSÖE	

FILED
JAN 08 2003

CHARLES P. HUTSON
CIRCUIT CLERK

(Date File Stamp)

Judgment - Small Claims

On the original claim in this case, the Court finds for the:

plaintiff(s)/petitioner(s)

defendant(s)/respondent(s)

in the amount of \$ 3,100.00, plus interest of \$ 0, and costs of \$ 52.54, totaling \$ 3052.54.

On the counterclaim, the Court finds for the:

plaintiff(s)/petitioner(s)

defendant(s)/respondent(s)

in the amount of \$ _____, plus interest of \$ _____, and costs of \$ _____, totaling \$ _____.

Therefore, judgment is entered for the:

plaintiff(s)/petitioner(s)

defendant(s)/respondent(s)

in the amount of \$ 3,000.00, plus interest of \$ _____, and costs of \$ 52.54, totaling \$ 3052.54.

JANUARY 9, 2003

Date

Judge

Instructions:

IF YOU WIN:

- (1) If the Court has awarded you money, contact the opposing party to see if the party will pay.
- (2) Wait ten days from the day of the Court's decision. If the losing party has not paid the judgment voluntarily or appealed, contact the clerk of the small claims division to obtain forms to start collection proceedings.

IF YOU LOSE:

- (1) You have ten days from the date of the Court's decision to appeal. If you wish to appeal, contact the clerk of the small claims division.
- (2) If you do not file your appeal and post appeal costs and fees within ten days, the decision of the Court will be final.
- (3) If you want to pay the judgment, contact the winning party and make arrangements to pay.
- (4) To protect your credit rating, have the winning party sign a Satisfaction of Judgment form, which is available from the clerk of the small claims division, and file it with the clerk.