Substitute Form PTO-1595 Attorney Docket No.: 00786-606001

Client's Ref. No.: Thadhani - SHBG Assay (MGH 2427)

RECORDATION FORM COVER SHEET **PATENTS ONLY**

Commissioner for Patents: Please record the attached original docume	nt(s) or copy(les).	
Name of conveying party(les):	2. Name and address of receiving party(ies):	
Ravi Thadhani	The General Hospital Corporation	
Additional name(s) attached? ☐ Yes 图 No	55 Fruit Street	
3. Nature of conveyance:	Boston, MA 02114	
 ■ Assignment □ Merger □ Security Agreement □ Change of Name □ Other: 		
Execution Date: 5/27/2005	Additional names/addresses attached? ☐ Yes ☒ No	
4. Application number(s) or patent number(s):	•	
If this document is being filed with a new application, the execution date of the application is:		
A. Patent Application No(s).;	B: Patent No(s).:	
10/947,791		
Additional numbers attached? ☐ Yes ☑ No		
 Name/address of party to whom correspondence concerning document should be mailed: 	6. Total number of applications/patents involved: 1	
FAUSTINO A. LICHAUCO	7. Total fee (37 CFR §3.41): \$40	
Fish & Richardson P.C. 225 Franklin Street	☐ Enclosed ☐ Authorized to charge Deposit Account,	
Boston, MA 02110-2804	8. Deposit Account No.: 06-1050	
	Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.	
DO NOT USE	THIS SPACE	
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.		
Faustino A. Lichauco Reg. No. 41,942 Name of Person Signing Signature	Marie June 9, 2000	
Tota	al number of pages including coversheet, attachments and document: 4	
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CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to the Patent and Trademark Office on the date indicated below.

Irja Zarembok
Typed Name of Person Signing Certificate
PATENT

REEL: 016319 FRAME: 0368

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Attorney Docket No: 00786-606001 Thadhani - SHBG Assay (MGH 2427)

ASSIGNMENT

For valuable consideration, I, Ravi Thadhani, of 8 Whittier Place, Apt. 15H, Boston, MA 02114; hereby assign to THE GENERAL HOSPITAL CORPORATION, a corporation of Massachusetts, having a place of business at 55 Fruit Street, Boston, Massachusetts 02114, United States of America, 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 subject of an application for United States Patent signed by me, entitled SCREENING FOR GESTATIONAL DISORDERS, filed September 23, 2004, and assigned U.S. Serial Number 10/947,791, 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, 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 I authorize the Assignee to apply in all countries in my 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 I agree for me and my 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.

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PATENT

REEL: 016319 FRAME: 0369

Attorney Docket No: 00786-606001 Thadhani - SHBG Assay (MGH 2427)

DATE:	5/27/05		
DAID		RAVI THADHANI	

STATE OF Massachusth) SS.
COUNTY OF Supple

On No. 27, 2005 before me, the undersigned, a notary public for the State of Nassaulte to the personally appeared RAVI THADHANI personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.

Notary Public

KENDALL P. WATTS

Notary Public

Notary Public

Commonwalth of Massachusetts

My Commission Expires

January 13, 2006

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Assignment Page 2 of 2

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