Form PTO-1595 (Rev. 03/05)
OMB No. 0651-0027 (exp. 6/30/2005)



U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office

-10 <u>3</u> 07	<u> 2012 </u>	
To the Director of the U.S. Patent and Trademark Office: Plea	ase record the attached documents or the new address(es) below	1.
1. Name of conveying party(ies)	2. Name and address of receiving party(ies)	
Matthew J. Dunfee Susan J. Dunfee	Name: DUNFEE & DUNFEE LLC	
	Internal Address:	
A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	<u> </u>	
Additional name(s) of conveying party(ies) attached? Yes ✓ N 3. Nature of conveyance/Execution Date(s):	Street Address: P.O. Box 7	
Execution Date(s) 01/15/2005; 03/31/2005	Street Address. P.O. Box 7	
✓ Assignment Merger	- The state of the	
Security Agreement Change of Name	City: Jordan	
Joint Research Agreement	State: Minnesota	Ť
Government Interest Assignment		
Executive Order 9424, Confirmatory License	Country: United States Zip: 55352	
Other	Additional name(s) & address(es) attached? Yes	No
Additional numbers a 5. Name and address to whom correspondence concerning document should be mailed:	attached? Yes No 6. Total number of applications and patents involved: 2	
Name:Dwight N. Holmbo		
Internal Address:	7. Total fee (37 CFR 1.21(h) & 3.41) \$ 80.00	
	Authorized to be charged by credit card	
Stroot Address States St.	Authorized to be charged to deposit account V Enclosed	
Street Address: 611 1st Street N.		
	None required (government interest not affecting	titlo
	None required (government interest not affecting	title
City: Waterville	8. Payment Information	
City: Waterville State: Minnesota Zip: 56096	8. Payment Information a. Credit Card Last 4 Numbers	
	8. Payment Information a. Credit Card Last 4 Numbers Expiration Date	
State: Minnesota Zip: 56096	8. Payment Information a. Credit Card Last 4 Numbers	
State: Minnesota Zip:56096 Phone Number: 507-362-4845	8. Payment Information a. Credit Card Last 4 Numbers Expiration Date	
State: Minnesota Zip: 56096 Phone Number: 507-362-4845 Fax Number: Email Address: dholmbosr@frontiernet.net 9. Signature:	8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number Authorized User Name	
State: Minnesota Zip: 56096 Phone Number: 507-362-4845 Fax Number:	8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number Authorized User Name	

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

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PATENT REEL: 016927 FRAME: 0839

ATTORNEY DOCKET NO.

DUNF-0101

ASSIGNMENT

Page 1 of 1

WHEREAS, I, the undersigned inventor (or one of the undersigned joint inventors), of residence as listed, having invented certain new and useful improvements as below entitled, for which application for United States Letters Patent is made, said application having been executed on the date set forth below, (Application No. 11/035,485); and

WHEREAS, DUNFEE & DUNFEE LLC, a corporation organized and existing under the laws of the State of Minnesota, with a mailing address at P.O. Box 7, Jordan, MN 55352, is desirous of acquiring my entire right, title and interest in and to said invention, and to said application and any Letters Patent that may issue thereon;

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, I hereby sell and assign to said DUNFEE & DUNFEE LLC, its successors and assigns, my entire right, title and interest in and to said invention and in to said application and all patents which may be granted therefore, and all divisionals, reissues, substitutions, continuations, and extensions thereof; and I hereby authorize and request the Commissioner of Patents and Trademarks to issue all patents for said invention, or patent resulting therefrom, insofar as my interest is concerned, to said DUNFEE & DUNFEE LLC, as assignee of my entire right, title and interest.

I also hereby sell and assign to DUNFEE & DUNFEE LLC, its successors and assigns, my foreign rights to said invention disclosed in said application, in all countries of the world, including the right to file applications and obtain patents under the terms of the International Convention for the Protection of Industrial Property, and of the European Patent Convention, and further agree to execute any and all patent applications, assignments, affidavits, and any other papers in connection therewith necessary to perfect such patent rights.

I hereby further agree that I will communicate to said DUNFEE & DUNFEE LLC, or to its successors, assigns, and legal representatives, any facts known to me respecting said invention, and at the expense of said assignee company, testify in any legal proceedings, sign all lawful papers, execute all divisional, continuation, reissue and substitute applications, make all lawful oaths, and generally do everything possible to aid said DUNFEE & DUNFEE LLC, its successors, assigns and nominees to obtain and enforce proper patent protection for said invention in all countries.

IN WITNESS WHEREOF, I hereunto set hand and seal this day and year;

TITLE OF INVENTION	AMBULATORY SPINAL UNLOADING METHOD AND APPARATUS		
SIGNATURE OF INVENTOR AND NAME	Matthew J. Dunfee	Sugan J. Dunkge	
DATE	4-29-05	4-29-05	
RESIDENCE (City, County, State)	11840 240 th Street W. Belle Plaine, MN 56011	11840 240 th Street W. Belle Plaine, MN 56011	
DATE APPLICATION EXECUTED	January 15, 2005	January 15, 2005	

PATENT REEL: 016927 FRAME: 0840

ATTORNEY DOCKET NO.
DUNF-0102

ASSIGNMENT

Page 1 of 1

WHEREAS, I, the undersigned inventor (or one of the undersigned joint inventors), of residence as listed, having invented certain new and useful improvements as below entitled, for which application for United States Letters Patent is made, said application having been executed on the date set forth below, (Application No. 11/094,862); and

WHEREAS, DUNFEE & DUNFEE LLC, a corporation organized and existing under the laws of the State of Minnesota, with a mailing address at P.O. Box 7, Jordan, MN 55352, is desirous of acquiring my entire right, title and interest in and to said invention, and to said application and any Letters Patent that may issue thereon;

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, I hereby sell and assign to said DUNFEE & DUNFEE LLC, its successors and assigns, my entire right, title and interest in and to said invention and in to said application and all patents which may be granted therefore, and all divisionals, reissues, substitutions, continuations, and extensions thereof; and I hereby authorize and request the Commissioner of Patents and Trademarks to issue all patents for said invention, or patent resulting therefrom, insofar as my interest is concerned, to said DUNFEE & DUNFEE LLC, as assignee of my entire right, title and interest.

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IN WITNESS WHEREOF, I hereunto set hand and seal this day and year;

RECORDED: 08/30/2005

TITLE OF INVENTION	AMBULATORY SPINAL UNLOADING METHOD AND APPARATUS		
SIGNATURE OF INVENTOR AND NAME	Matthew J. Dunfee	Susan J. Dunfee	ce .
DATE	4-29-05	4-29-05	
RESIDENCE (City, County, State)	11840 240 th Street W. Belle Plaine, MN 56011	11840 240 th Street W. Belle Plaine, MN 56011	
DATE APPLICATION EXECUTED	March 31, 2005	March 31, 2005	

PATENT REEL: 016927 FRAME: 0841