Form PTO-1595 (Rev. 07/05) OMB No. 0651-0027 (exp. 6/30/2008)	U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office
	DRM COVER SHEET
PATENTS ONLY	
To the Director of the U.S. Patent and Trademark Office: Plea	se record the attached documents or the new address(es) below.
1. Name of conveying party(ies)	2. Name and address of receiving party(les)
John H. Vrzalik	Name: KCI Licensing, Inc.
	Internal Address:
Additional name(s) of conveying party(les) attached? Yes ✓ No	
3. Nature of conveyance/Execution Date(s):	Street Address: P.O. Box 659508
Execution Date(s) October 21, 2005	
✓ Assignment	
Security Agreement Change of Name	City: San Antonio
Joint Research Agreement	State: Texas
Government Interest Assignment	Country: U.S.A. Zip:78265
Executive Order 9424, Confirmatory License	Country: U.S.A. Zip: 78265
Other	Additional name(s) & address(es) attached? Yes 🗹 No
	document is being filed together with a new application.
A. Patent Application No.(s) 08/904,121	B. Patent No.(s)
UM30-7, 12.1	
Additional numbers at	l tached? ☐ Yes ✔ No
5. Name and address to whom correspondence	6. Total number of applications and patents
concerning document should be mailed:	involved: 1 (one)
Name: Robert W. Mason	7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00
Internal Address: Legal Department	Authorized to be charged by credit card
	✓ Authorized to be charged to deposit account
Street Address: P.O. Box 659508	Enclosed
	None required (government interest not affecting title)
City: San Antonio	8. Payment Information
State: Texas Zîp:78265	a. Credit Card Last 4 Numbers Expiration Date
Phone Number: 210-255-6271	•
Fax Number: 210-255-6969	b. Deposit Account Number 500326
Email Address: masonw@kci1.com	Authorized User Name Robert W. Mason
Signature: Kolul W Model Signature	October 25, 2005 Date
_	Total number of pages including cover
Robert W. Mason Name of Person Signing	sheet, attachments, and documents:

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or malled to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1460, Alexandria, V.A. 22313-1450

PATENT REEL: 016936 FRAME: 0731

ASSIGNMENT

WHEREAS, I, JOHN H. VRZALIK, a citizen of the United States residing at 4444 Lane Street, San Antonio, Texas 78263 (hereinafter referred to as the "Assignor") am the original joint inventor of a certain new and useful BARIATRIC BED APPARATUS AND METHODS, for which I have executed an application for Utility Patent Application of the United States; and

WHEREAS, KCI Licensing, Inc., a corporation organized under the laws of the State of Delaware, whose address is P.O. Box 659508, San Antonio, Texas 78265-9508 ("Assignee"), is desirous of obtaining the entire right, title and interest in, to and under the said improvements and the said application;

NOW THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, I, the said Assignor, have sold, assigned, transferred, and set over, and by these presents, do hereby sell, transfer, and set over, unto the said Assignee, its successors, legal representatives and assigns, my entire right, title and interest in, to and under the said improvements, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all applications for Letters Patent which may hereinafter be filed for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and I hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patent for said improvements to the said Assignee, its successors, legal representatives and assigns, in accordance with the terms of this instrument;

AND, I hereby covenant that I have the full right to convey the entire interest herein assigned, and that I have not executed, and will not execute, any agreement in conflict herewith;

AND, I hereby further covenant and agree that I will communicate to the said Assignee, its successors, legal representatives and assigns, any facts known to me respecting said improvements, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths, and generally do everything possible to aid the said Assignee, its successors, legal representatives and assigns, to obtain and enforce proper patent and similar protection for said improvement in all countries.

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 2/5 day of October 2005.

Assignor, JOHN H. VRZALIK

THE STATE OF TEXAS

COUNTY OF BEXAR

Before me, a notary public, on this day personally appeared _JOHN H. VRZALIK, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this 26 day of _______

Notary Public, State of Texas My commission expires: 7.16.07

NADINE L. MICHELENA Notary Public, State of Texas My Commission Expires July 16, 2007

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İ	Internal Address:
Additional name(s) of conveying party(ies) attached? Yes No. 3. Nature of conveyance/Execution Date(s): Execution Date(s) October 21, 2005 Assignment Merger	Street Address: P.O. Box 659508
✓ Assignment	City: San Antonio
Joint Research Agreement	State: Texas
Government Interest Assignment Executive Order 9424, Confirmatory License	Country: U.S.A. Zip:78265
Other	Additional name(s) & address(es) attached? Yes V No.
	B. Patent No.(s)
5. Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved: 1 (one)
Name:Robert W. Mason	7. Total fee (37 CFR 1.21(h) & 3.41) \$40.00
Internal Address: Legal Department	Authorized to be charged by credit card
Street Address: P.O. Box 659508	✓ Authorized to be charged to deposit account ☐ Enclosed ☐ None required (government interest not affecting title)
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State: Texas Zip: 78265	a. Credit Card Last 4 Numbers Expiration Date
Phone Number: 210-255-6271	b. Deposit Account Number 500326
Fax Number: 210-255-6969	
Email Address: masonrw@kcl1.com	Authorized User Name Robert W. Mason
3. Signature: Kalut W Malon Signature	October 25, 2005 Date
Robert W. Mason Name of Person Signing	Total number of pages including cover sheet, attachments, and documents:

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PATENT REEL: 016936 FRAME: 0734