

Substitute Form PTO-1595
 Attorney Docket No.: 10286-033001
 Client's Ref. No.: BWH 942; chiron: PL028179.0002

RECORDATION FORM COVER SHEET PATENTS ONLY

Commissioner for Patents: Please record the attached original document(s) or copy(ies).

1. Name of conveying party(ies): Dennis L. Kasper and Hilde-Kari Guttormsen Additional name(s) attached? ☐ Yes ☒ No	2. Name and address of receiving party(ies): The Brigham and Women's Hospital, Inc. 75 Francis Street Boston, MA 02115 Additional names/addresses attached? ☐ Yes ☒ No
3. Nature of conveyance: ☒ Assignment ☐ Merger ☐ Security Agreement ☐ Change of Name ☐ Other: Execution Date: 03/10/2006	
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): 11/264,731 B. Patent No(s): Additional numbers attached? ☐ Yes ☒ No	
5. Name/address of party to whom correspondence concerning document should be mailed: LAURIE BUTLER LAWRENCE Fish & Richardson P.C. 225 Franklin Street Boston, MA 02110	6. Total number of applications/patents involved: 1 7. Total fee (37 CFR §3.41): \$40 ☐ Enclosed ☒ Authorized to charge Deposit Account. 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: <i>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.</i> Laurie Butler Lawrence Reg. No. 46,593 Name of Person Signing <i>Laurie Lawrence</i> Signature 6/19/06 Date	
Total number of pages including coversheet, attachments and document: 4	

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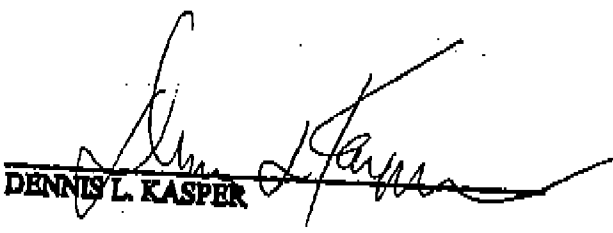
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ASSIGNMENT

For valuable consideration, we, Dennis L. Kasper, of 48 Monument Avenue, Charlestown, MA 02129; Hilde-Kari Guttorriksen, of 495 Boylston Street, #3, Brookline, MA 02445; hereby assign to THE BRIGHAM AND WOMEN'S HOSPITAL, INC., a corporation of Massachusetts, having a place of business at 75 Francis Street, Boston, MA 02115, 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 us, entitled MODIFIED STREPTOCOCCAL POLYSACCHARIDES AND USES THEREOF, filed November 1, 2005, and assigned U.S. Serial Number 11/264,731; 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 we authorize the Assignee to apply in all countries in our 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 we agree for ourselves and our 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.

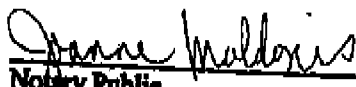
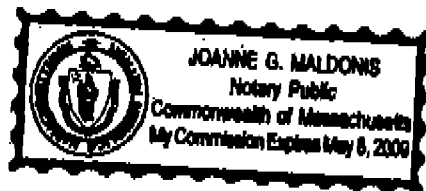
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DATE:

03/10/06
DENNIS L. KASPERSTATE OF Massachusetts
COUNTY OF Suffolk } SS.

On March 10, 2006, before me, the undersigned, a notary public for the State of _____, there personally appeared DENNIS L. KASPER 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

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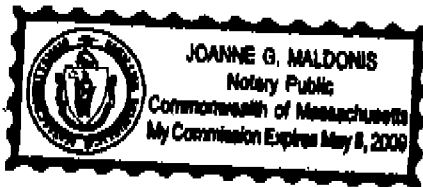
DATE: 3/10/2006

Hilde-Kari Guttormsen
HILDE-KARI GUTTORMSEN

STATE OF Massachusetts
COUNTY OF Suffolk } SS.

On March 10, 2006, before me, the undersigned, a notary public for the State of Massachusetts, there personally appeared HILDE-KARI GUTTORMSEN 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 her authorized capacity and that by her signature on this Assignment, the person or the entity upon behalf of which she acted, executed this Assignment.

WITNESS my hand and official seal.



Joanne Maldonis
Notary Public

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