PATENT ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
Jonathon E. Giftakis	06/30/2006
Martin T. Gerber	07/12/2006

RECEIVING PARTY DATA

Name:	Medtronic, Inc.	
Street Address:	710 Medtronic Parkway	
City:	Minneapolis	
State/Country:	MINNESOTA	
Postal Code:	55432	

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	11413621

CORRESPONDENCE DATA

Fax Number: (651)735-1102

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 651-286-8351

Email: watson@ssiplaw.com

Correspondent Name: Shumaker & Sieffert, P.A.

Address Line 1: 8425 Seasons Parkway

Address Line 2: Suite 105

Address Line 4: St. Paul, MINNESOTA 55125

ATTORNEY DOCKET NUMBER:	1023-527US02
NAME OF SUBMITTER:	Jason D. Kelly

Total Attachments: 4

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Attorney Docket No.: 1023-527US02

<u>ASSIGNMENT</u>

For valuable consideration, we, Jonathon E. Giftakis of 6741 Troy Lane N., Maple Grove, MN 55311 and Martin T. Gerber of 6384 Forestview Lane, Maple Grove, MN 55369, hereby assign to: Medtronic, Inc., having a place of business at: 710 Medtronic Parkway, Minneapolis, MN 55432 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 the subject of an application for United States Patent signed by us, entitled ELECTRICAL STIMULATION TO ALLEVIATE CHRONIC PELVIC PAIN, filed April 28, 2006, and assigned U.S. Serial Number 11/413,621; 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,

Date: 6/30/2006 Jonathon E. Giftakis

State of Minnesots)
(Second of ANAK)

County of Anoka

On this 30 day of 7, 2006 before me, Kowle K. Was,

Notary Public, personally appeared Jonathon E. Giftakis personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official scal.

Signature of Notary Public My Commission Expires:

: 1-31-2010

KARLA K. WEIS

NOTARY PUBLIC - MINNESOTA

MY COMMISSION EXPIRES

JANUARY 31, 2010

Signature of Notary Public My Commission Expires:

SHUMAKER & SIEFFERT

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Attorney Docket No.: 1023-527US02

Date:

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	• 111	Jonathon E. Giftakis
State of)) ss:	
County of	í	
basis of satisfactory and acknowledged t	evidence) to be the to me that he/she/t tature on the instru	, 20 , before me,, onathon E. Giftakis personally known to me (or proved to me on the he person(s) whose name is/are subscribed to the within instrument they executed the same in his/her/their authorized capacity, and that ument the person(s), or the entity upon behalf of which the person(s)
		WITNESS my hand and official seal.
		Signature of Notary Public
-		My Commission Expires:

Date: July 12,2006

Martin T. Gerber

State of Minnesota

County of Anora) ss.

On this day of d



WITNESS my hand and official seal.

Signature of Notary Public My Commission Expires: