JUL-27-2006 12:06

Form PTO-1595 (Rev. 07/05) OMB No. 0651-0027 (exp. 6/30/2008)

700278171

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

REEL: 018019 FRAME: 0572

P.01/03

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.	
1. Name of conveying party(ies) Robert R. Riggsby	2. Name and address of receiving party(ies)
Robert R. Riggsby	Name: Scientific-Atlanta, Inc.
	Internal Address:
Additional name(s) of conveying party(ies) attached?	o
3. Nature of conveyance/Execution Date(s):	Street Address: <u>5030 Sugarloaf Parkway</u>
Execution Date(s) 7/25/06	_
Assignment Merger	
Security Agreement Change of Name	City: Lawrenceville
Joint Research Agreement	State: Georgia
Government Interest Assignment	
Executive Order 9424, Confirmatory License	Country: United States Zip: 30044
Other	Additional name(s) & address(es) attached? Ses I No
4. Application or patent number(s):	document is being filed together with a new application.
A. Patent Application No.(s)	B. Patent No.(s)
11/456,145	
	Ittached? TYes No
Additional numbers a	ittached? Yes No
	6. Total number of applications and patents
Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved: 1
•	involved:
concerning document should be mailed: Name: <u>Wm. Brook Lafferty</u>	involved: 7. Total fee (37 CFR 1.21(h) & 3.41) \$40.00
concerning document should be mailed:	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card
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concerning document should be mailed: Name: <u>Wm. Brook Lafferty</u> Internal Address: <u>MS 4.3.518</u> Street Address: <u>5030 Sugarloaf Parkway</u>	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card ✓ Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card
concerning document should be mailed: Name: Wm. Brook Lafferty Internal Address: MS 4.3.518 Street Address: 5030 Sugarloaf Parkway City: Lawrenceville State: Georgia Zip: 30044	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card ✓ Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date
concerning document should be mailed: Name: Wm. Brook Lafferty Internal Address: MS 4.3.518 Street Address: 5030 Sugarloaf Parkway City: Lawrenceville State: Georgia Zip: 30044 Phone Number: 770-236-2114	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card ✓ Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card
concerning document should be mailed: Name: Wm. Brook Lafferty Internal Address: MS 4.3.518 Street Address: 5030 Sugarloaf Parkway City: Lawrenceville State: Georgia Zip: 30044 Phone Number: 770-236-2114 Fax Number: 770-236-4806	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card ✓ Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date
concerning document should be mailed: Name: Wm. Brook Lafferty Internal Address: MS 4.3.518 Street Address: 5030 Sugarloaf Parkway City: Lawrenceville State: Georgia Zip: 30044 Phone Number: 770-236-2114 Fax Number: 770-236-4806 Email Address: brook.lafferty@sciatl.com	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card ✓ Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number19-0761
concerning document should be mailed: Name: Wm. Brook Lafferty Internal Address: MS 4.3.518 Street Address: 5030 Sugarloaf Parkway City: Lawrenceville State: Georgia Zip: 30044 Phone Number: 770-236-2114 Fax Number: 770-236-4806 Email Address: brook.lafferty@sciatl.com 9. Signature: U.M.M.M.M.	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card Authorized to be charged by credit card Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 19-0761 Authorized User Name Wm. Brook Lafferty
concerning document should be mailed: Name: Wm. Brook Lafferty Internal Address: MS 4.3.518 Street Address: 5030 Sugarloaf Parkway City: Lawrenceville State: Georgia Zip: 30044 Phone Number: 770-236-2114 Fax Number: 770-236-4806 Email Address: brook.lafferty@sciatl.com	involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00 Authorized to be charged by credit card ✓ Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 19-0761 Authorized User Name Wm. Brook Lafferty

ASSIGNMENT AND AGREEMENT

For and in consideration of the sum of One Dollar to us in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, I, Robert R. Riggsby, have sold, assigned and transferred, and do hereby sell, assign and transfer, unto Scientific-Atlanta, Inc., a corporation of the State of Georgia, having its principal office in Lawrenceville, State of Georgia, United States of America, and its successors, assigns, and legal representatives, the entire right, title and interest for the United States of America in and to certain inventions relating to improvements in FORMAT CONVERTER WITH SMART MULTITAP AND UPSTREAM SIGNAL REGULATOR (Case No. A-11311) described, illustrated and claimed in an application for Letters Patent of the United States of America executed by me on the date indicated by my signature below, together with the entire right, title and interest in and to said application, and in and to Letters Patent which may be issued upon said application, and upon any division, extension, continuation or reissue thereof.

I hereby also sell, assign and transfer unto the said Scientific-Atlanta, Inc., the entire right, title and interest in and to said invention and in and to applications for Letters Patent therefor in all countries foreign to the United States of America, including all rights under any and all international conventions and treaties in respect of said invention and said applications for Letters Patent in foreign countries, and we further authorize the said Scientific-Atlanta, Inc., to apply for Letters Patent in foreign countries directly in its own name, and to claim priority of the filing date of the said application for Letters Patent of the United States of America under the provisions of any and all international conventions and treaties.

I hereby authorize and request the Commissioner of Patents of the United States of America to issue Letters Patent upon the aforesaid application, division, extension, continuation or reissue, to the said Scientific-Atlanta, Inc., for the sole use and behalf of said Scientific-Atlanta, Inc., its successors, assigns and legal representatives, to the full end of the term for which said Letters Patent may be granted, the same as they would have been held and enjoyed by me had this assignment not been made, and we hereby authorize and request the equivalent authorities in foreign countries to issue the patents of their respective countries to the said Scientific-Atlanta, Inc.

I agree that, when requested, I will, without charge to said **Scientific-Atlanta**, Inc., but at its expense, sign all papers, take all rightful oaths, and do all acts which may be necessary, desirable or convenient for securing and maintaining patents for said inventions in any and all countries and for vesting title thereto in said **Scientific-Atlanta**, Inc., its successors, assigns and legal representatives or nominees.

Docket No.: A-11311

PATENT REEL: 018019 FRAME: 0573

Robert R. Rig

7/25/06 DATE

STATE OF GEORGIA COUNTY OF GWINNETT

I. <u>Keberen J.</u> <u>Padil</u> a Notary Public in and for the aforesaid County, do hereby certify that the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that he signed, sealed and delivered said instrument as his free and voluntary act and deed for the uses and purposes therein set forth.

Given under my hand and notarial seal this ______ day of ______

Rubecca J.

Notary Public Signature

, 2006.

REBECCA J. PADILLA NOTARY PUBLIC Gwinnett County State of Georgia My Comm. Expires Jan. 10, 2009

Docket No.: A-11311

RECORDED: 07/27/2006

PATENT REEL: 018019 FRAME:::057403