

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT												
NATURE OF CONVEYANCE:	ASSIGNMENT												
CONVEYING PARTY DATA													
<table border="1"><thead><tr><th>Name</th><th>Execution Date</th></tr></thead><tbody><tr><td>John C. Boutet</td><td>07/09/2007</td></tr><tr><td>Christopher M. Muir</td><td>07/09/2007</td></tr><tr><td>Paul B. Stumpf</td><td>07/09/2007</td></tr></tbody></table>		Name	Execution Date	John C. Boutet	07/09/2007	Christopher M. Muir	07/09/2007	Paul B. Stumpf	07/09/2007				
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Christopher M. Muir	07/09/2007												
Paul B. Stumpf	07/09/2007												
RECEIVING PARTY DATA													
<table border="1"><tr><td>Name:</td><td>Carestream Health, Inc.</td></tr><tr><td>Street Address:</td><td>150 Verona Street</td></tr><tr><td>Internal Address:</td><td>Patent Legal Staff</td></tr><tr><td>City:</td><td>Rochester</td></tr><tr><td>State/Country:</td><td>NEW YORK</td></tr><tr><td>Postal Code:</td><td>14608-1733</td></tr></table>		Name:	Carestream Health, Inc.	Street Address:	150 Verona Street	Internal Address:	Patent Legal Staff	City:	Rochester	State/Country:	NEW YORK	Postal Code:	14608-1733
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PROPERTY NUMBERS Total: 1													
<table border="1"><thead><tr><th>Property Type</th><th>Number</th></tr></thead><tbody><tr><td>Application Number:</td><td>11741246</td></tr></tbody></table>		Property Type	Number	Application Number:	11741246								
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CORRESPONDENCE DATA													
Fax Number: (585)723-1234 <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>													
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Address Line 4: Rochester, NEW YORK 14608-1733													
ATTORNEY DOCKET NUMBER:	93316/SLP												
NAME OF SUBMITTER:	Laurie A. Wurtz												
Total Attachments: 2													

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PATENT  
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# ASSIGNMENT

For good and valuable consideration received, including salary or payment for the making of inventions, or employee benefits, I/we do hereby assign to Carestream Health, Inc., a Delaware corporation having a principal place of business in Rochester, New York, its successors and assigns, the entire right, title and interest, including priority rights, in and to all of my/our inventions and improvements disclosed in an application for patent for

## METHOD AND APPARATUS FOR DETERMINING FOCUS OF A SCANNING SYSTEM

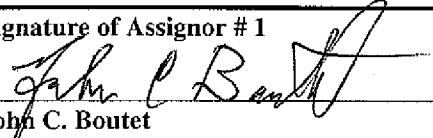
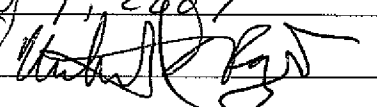
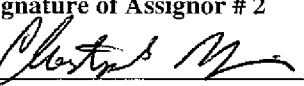

which is [check one]

<input checked="" type="checkbox"/>	a non-provisional application for patent executed on the date(s) shown below by:
<input type="checkbox"/>	a provisional application for patent by :
<input type="checkbox"/>	an international application for patent by :

Assignor # 1: John C. Boutet	Date July 9, 2007
Assignor # 2: Christopher M. Muir	Date July 9, 2007
Assignor # 3: Paul B. Stumpf	Date July 9, 2007

and [check one] ☐ about to be filed ☒ already filed as USSN11/741,246 on April 27, 2007

in the United States Patent and Trademark Office, together with said application, and any corresponding or counterpart provisional or non-provisional application, and any divisional, continuation, substitute, reissue, re-examination application thereof, and any applications, including international applications, corresponding or being a counterpart thereto in whole or in part in the United States and all other countries. I/We do hereby acknowledge that I/we were subject to an obligation of assignment to Carestream Health, Inc. with respect to the entire right, title and interest in and to said inventions at the time the inventions were made. I/We also do hereby assign to Carestream Health, Inc. the entire right, title and interest in and to Letters Patent and similar protective rights granted on any of these applications, as well as the right to claim any applicable priority rights arising from any of these applications under the terms of any applicable conventions, treaties, statutes or regulations. I/We agree that any of these applications, at Carestream Health, Inc.'s sole discretion, may be filed and issued in the name of Carestream Health, Inc. or its designee. I/We agree to execute such documents which in the judgment of Carestream Health, Inc. may be necessary to obtain any such patents and similar protective rights and to maintain the title thereto in Carestream Health, Inc. or its designee. I/We further agree that, upon request, but without out-of-pocket expense to myself/ourselves, I/we shall furnish to Carestream Health, Inc. or its designee any data, information, exhibits, memoranda, or other evidence in my/our possession relating to any of said inventions or improvements and shall testify in any ex parte or inter partes legal or administrative proceedings relating thereto. I/We authorize and request issuance of all Letters Patent and similar protective rights that may be granted on any of these applications, to the extent that and in such manner as such issuance shall be requested by Carestream Health, Inc. or its designee. This document shall be governed, construed and interpreted in all respects in accordance with the laws of the State of New York, USA.

<p>Signature of Assignor # 1</p> <p></p> <p>John C. Boutet</p> <p>Date: July 9, 2007</p> <p>Witnessed: </p>	<p>Witness Address, if other than</p> <p>Carestream Health, Inc., Rochester, NY 14608</p> <p>_____</p> <p>_____</p>
<p>Signature of Assignor # 2</p> <p></p> <p>Christopher M. Muir</p> <p>Date: July 9, 2007</p> <p>Witnessed: </p>	<p>Witness Address, if other than</p> <p>Carestream Health, Inc., Rochester, NY 14608</p> <p>_____</p> <p>_____</p>

<p>Signature of Assignor # 3 <u>Paul B. Stumpf</u> Paul B. Stumpf Date: <u>7/9/07</u> Witnessed: <u>Steve D. David</u></p>	<p>Witness Address, if other than Carestream Health, Inc., Rochester, NY 14608 _____ _____ _____</p>
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