# PATENT ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

## **CONVEYING PARTY DATA**

Name	Execution Date
David Fink	11/27/2007
David Heagle	11/19/2007
Sharon Mulligan	12/07/2007

### **RECEIVING PARTY DATA**

Name:	Tyco Healthcare Group LP	
Street Address: 15 Hampshire Street		
City:	Mansfield	
State/Country:	MASSACHUSETTS	
Postal Code:	02048	

#### PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	11904411

### **CORRESPONDENCE DATA**

Fax Number: (631)501-3526

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

Phone: 631-501-5700

Email: tdagostino@cdfslaw.com

Correspondent Name: Kendall (CDFS)

Address Line 1: 445 BROAD HOLLOW ROAD

Address Line 2: SUITE 225

Address Line 4: MELVILLE, NEW YORK 11747

ATTORNEY DOCKET NUMBER:	H-KN-00681 (1502-188)
NAME OF SUBMITTER:	Joseph W. Schmidt

**Total Attachments: 8** 

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PATENT REEL: 020239 FRAME: 0357

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RECORDATION FORM COVER SHEET  PATENTS ONLY  Atty. Docket No.: H-KN-00681 (1502-188)		
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)	2. Name and address of receiving party(ies)	
David Fink	Name: Tyco Healthcare Group LP	
David Heagle Sharon Mulligan	Internal Address:	
Additional name(s) of conveying party(ies) attached?  Yes ✓ No		
3. Nature of conveyance/Execution Date(s):	Street Address: 15 Hampshire Street	
Execution Date(s) 11/27/07; 11/19/07; 12/07/07, respectively		
Assignment Merger		
Security Agreement Change of Name	City: Mansfield	
☐ Joint Research Agreement	State: MA	
Government Interest Assignment	Country: USZip: 02048	
Executive Order 9424, Confirmatory License	Country: US Zip: 02048	
Other	Additional name(s) & address(es) attached? Yes V No	
11/904,411 filed September 27, 2007  . Additional numbers att	ached? Yes VNo	
5. Name and address to whom correspondence	6. Total number of applications and patents	
concerning document should be mailed:	involved:_1	
Name: Carter, DeLuca, Farrell & Schmidt, LLP	<b>7. Total fee</b> (37 CFR 1.21(h) & 3.41) \$ 40.00	
Internal Address:	Authorized to be charged by credit card	
	Authorized to be charged to deposit account	
Street Address: 445 Broad Hollow Road	☐ Enclosed	
Suite 225	None required (government interest not affecting title)	
City: Melville	8. Payment Information	
State: <u>NY</u> Zip: <u>11747</u>	a. Credit Card Last 4 Numbers Expiration Date	
Phone Number: <u>631-501-5700</u>	b. Deposit Account Number 19-0254	
Fax Number: <u>631-501-3526</u>	,	
Email Address:	Authorized User Name <u>Joseph W. Schmidt</u>	
9. Signature:	December 13, 2007	
Signature	Date	
Joseph W. Schmidt, Reg. No. 36,920  Name of Person Signing	Total number of pages including cover sheet, attachments, and documents:	

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

**PATENT** 

For: [X] U.S. and/or [X] Foreign Rights
For: [X] U.S. Application or [] U.S. Patent
By: [X] Inventor(s) or [] Present Owner

## ASSIGNMENT OF INVENTION

In consideration of the payment by ASSIGNEE to ASSIGNOR of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration, ASSIGNOR(S), David Fink residing at 10 Cranberry Drive, Franklin, MA 02038, David Heagle residing at 12 Mercer Lane, Franklin, MA 02038, and Sharon A. Mulligan, 28 Addy Drive, Britsol, RI 02809 hereby sells, assigns and transfers to

ASSI	GNEE:	
		TycoHealthcare Group LP (Type or print name of ASSIGNEE)
		15 Hampshire Street Address
		Mansfield, MA 02048
		USA Nationality
and th	e success	ors, assigns and legal representatives of the ASSIGNEE
[X] th	e entire	right, title and interest
[] an	undivide	d percent (%) interest for the United States and its territorial possessions
		foreign countries, including all rights to claim priority, and all improvements which are disclosed in the invention entitled:
		PORTABLE WOUND THERAPY SYSTEM (title of invention)
and w	nich is fo	und in
(a) (b)	[]	U.S. patent application executed on even date herewith. U.S. patent application executed on
(c)	[X]	U.S. application Serial No. 11/904,411 filed on September 27, 2007.
(d)	[]	U.S. provisional application No. 60/
(e)	[]	filed on U.S. Patent No issued  PCT application No. PCT/US
(f)	[]	1 CT approanon 1 CT CD
	[]	filed on  A change of address to which correspondence is to be sent regarding patent maintenance fees is being sent separately.
(g)	[X]	and any legal equivalent thereof in a foreign country, including the right to claim priority and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, continuation-in-part, divisional, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

IN W	TNESS WHEREOF, I/We ha	eve hereunto set hand and seal this	(Date of signing).
WARNI	NG: Date of signing must be	the same as the date of execution of the application is	Fitem (a) was checked above.
David I	nink	\(\sim \sigma \frac{1}{27 \left  07}\) Dated	<del>_</del>
David 1	Heagle	Dated	_
Sharon	Mulligan	Dated	_
If ASSI	GNOR is a legal entity comp	Dated  Lete the following information	
		ype or print the name of the above person uthorized to sign on behalf of ASSIGNOR.	•
NOTE:	No witnessing, notarization or legal	itle ization is necessary. If the assignment is notarized or Use next page if notarization is desired.	legalized then it will only be prima facie

[X] Notarization or Legalization Page Added.

Commonwealth of Massachusetts )	
) ss	
County of Bristol )	<b>7</b> ,
3/14	Mombol and
Before me this day of	100 101 2007,
personally appeared and Truck	to me personally known to be the person described in and who
personally appeared over the second self-revised and the	
	me that he/she executed the same of his own free will for the
purposes therein set forth.	
	1/11/2/2011
	- Will Sanging
	Notary Public

AFFIX SEAL

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

IN WITNESS WHEREOF, I/We have hereunto set hand and seal this			(Date of signing).	
WARNE	NG; Date of signing	must be the same as the date of ex	ecution of the application if item	(a) was checked above.
David I	- ink		Dated	
Dlu	refty		November 19,0	2007
David I	Heagle O		Dated /	
Sharon	Mulligan		Dated	
			Dated	
If ASSI	GNOR is a legal entity	complete the following info	ormation	
		Type or print the name of the authorized to sign on behalf		
NOTE:		Title or legalization is necessary. If the SC 261. Use next page if notarizat		zed then it will only be prima facie
		[X] Notarization or Legaliz	ration Page Added.	

Commonwealth of Massachusetts	) ) ss
County of Bristol	)
	19th day of November 2007,
personally appeared	to me personally known to be the person described in and who acknowledged to me that he/she executed the same of his own free will for the
	Alle D. Rades Notary Public

AFFIX SEAL

JULIE D. PARKER
Notary Purinc
Commonwealth of Musiachusetts
My Commission Expires
April 28, 2011

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

IN WITNESS	WHEREOF, I/We have hereunto	set hand and seal this	(Date of signing).
WARNING:	Date of signing must be the same as the	date of execution of the application if ite	em (a) was checked above.
David Fink		Dated	
David Heagle		Dated	
Sharon Mulligar		12/7/07 Dated	
If A COLONIOD :	s a legal entity complete the follov	Dated vinc information	-
II ASSIGNOR II	s a legal entity complete the follow	wing intofination	
		name of the above person to on behalf of ASSIGNOR	
NOTE: No witne	Title ssing, notarization or legalization is necess	ary. If the assignment is notarized or leg	alized then it will only be prima facie

[X] Notarization or Legalization Page Added.

evidence of execution 35 USC 261. Use next page if notarization is desired.

) SS
County of Bristol )
Before me this 7th day of December 2007,
personally appeared

RECORDED: 12/13/2007