

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Hideki Morishima	05/07/2008
Takahiro Sasaki	05/28/2008
Hiromitsu Takase	05/12/2008
RECEIVING PARTY DATA	
Name:	Canon Kabushiki Kaisha
Street Address:	30-2, Shimomaruko 3-Chome, Ohta-ku
City:	Tokyo
State/Country:	JAPAN
Postal Code:	146-8501
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	12108049
CORRESPONDENCE DATA	
Fax Number:	(949)932-3560
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	+81-3-5732-8698
Email:	prj-epas@list.canon.co.jp
Correspondent Name:	Canon Kabushiki Kaisha
Address Line 1:	30-2, Shimomaruko 3-Chome, Ohta-ku
Address Line 4:	Tokyo, JAPAN 146-8501
ATTORNEY DOCKET NUMBER:	10046019US01
NAME OF SUBMITTER:	Marina Takamura
Total Attachments: 2 source=10046019US01Assignment#page1.tif source=10046019US01Assignment#page2.tif	

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REEL: 021139 FRAME: 0199

AND I/we hereby covenant that I/we have the full right to convey the entire right, title and interest herein assigned and that I/we have not executed and will not execute any agreement in conflict herewith.

AND I/we hereby covenant and agree that I/we will communicate to said Assignee or nominees all facts known to me/us pertaining to said inventions, and testify in all legal proceedings, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths and declarations and in general perform all lawful acts necessary or proper to aid said Assignee or nominees in obtaining, maintaining, and enforcing all lawful patent or other grants of protection of said inventions in any and all countries and regions.

By: Hideki Morishima
Hideki Morishima

Date: May 17, 2008

By: Takahiro Sasaki
Takahiro Sasaki

Date: May 28, 2008

By: Hiromitsu Takase
Hiromitsu Takase

Date: May 12, 2008

By: _____

Date: _____

By: _____

Date: _____

By: _____

Date: _____

By: _____

Date: _____

By: _____

Date: _____

By: _____

Date: _____

By: _____

Date: _____