

PATENT ASSIGNMENT

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SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	ASSIGNMENT	
CONVEYING PARTY DATA		
Name		Execution Date
Matthew P Gephart		09/11/2008
Philip J Berman		09/11/2008
RECEIVING PARTY DATA		
Name:	Pioneer Surgical Technology, Inc.	
Street Address:	375 River Park Circle	
City:	Marquette	
State/Country:	MICHIGAN	
Postal Code:	49855	
PROPERTY NUMBERS Total: 1		
Property Type	Number	
Application Number:	12161944	
CORRESPONDENCE DATA		
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ATTORNEY DOCKET NUMBER:	7115/89595	
NAME OF SUBMITTER:	Amanda L. Lowerre	
<p>Total Attachments: 3</p> <p>source=EXECUTED_Assignment#page1.tif</p> <p>source=EXECUTED_Assignment#page2.tif</p>		

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PATENT
REEL: 021515 FRAME: 0088

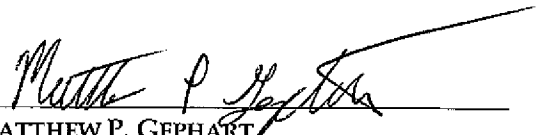
ASSIGNMENT

WE, MATTHEW P. GEPHART, of Marquette, County of Marquette and State of Michigan, and PHILIP J. BERMAN, of Negaunee, County of Marquette and State of Michigan, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to PIONEER SURGICAL TECHNOLOGY, INC., a corporation, having its principal place of business at 375 River Park Circle, Marquette, Michigan 49855, its successors, assigns and legal representatives, the entire right, title and interest, in and to all subject matter invented by us and disclosed in the patent application for Letters Patent of the United States entitled

RETRACTION APPARATUS AND METHOD OF USE


signed by us on this date; and in and to all Letters Patent and all Convention and Treaty rights of all kinds, including the right to claim priority from said application, and all rights in and to any continuation, continuation-in-part, and divisional application therefrom, and any reissue or re-examination as to any Letters Patent issuing therefrom, in all countries throughout the world, for all such subject matter described therein, including all rights of action and rights to recover damages for past infringements. We agree to sign all documents necessary to secure all said Letters Patent and rights, and request issuance of all said Letters Patent to the above assignee in accordance with this assignment.

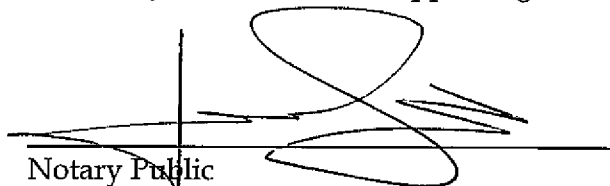
9/11/, 2008


MATTHEW P. GEPHART

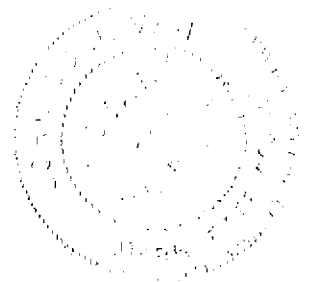
State of MICHIGAN)
) ss
County of MARQUETTE)

I hereby certify that before me in the County of Marquette, in the State of Michigan, personally appeared MATTHEW P. GEPHART, personally known by me, who then and there was duly sworn by me, and under oath acknowledged that the foregoing assignment was duly signed, sealed, and delivered by him on the date appearing at the foot thereof.

 SEPTEMBER 11TH, 2008


Notary Public
My Commission Expires:

JOHN SULLIVAN
Notary public, Marquette County, Michigan
My commission expires August 24, 2013



September 11, 2008

Philip J. Berman
PHILIP J. BERMAN

State of MICHIGAN)
) ss
County of MARQUETTE)

I hereby certify that before me in the County of Marquette, in the State of Michigan, personally appeared PHILIP J. BERMAN, personally known by me, who then and there was duly sworn by me, and under oath acknowledged that the foregoing assignment was duly signed, sealed, and delivered by him on the date appearing at the foot thereof.

SEPTEMBER 11th, 2008

[Signature]
Notary Public

My Commission Expires:

JOHN SULLIVAN
Notary public, Marquette County, Michigan
My commission expires August 24, 2013

