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To the honorable Co.

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Record the attached original document or copy thereof.

9-29-08

1. Name of Conveying Party(ies):

Gianfranco ROMAN (deceased)

Franca SERAFIN (Heir)

Giada ROMAN (Heir)

2. Name and Address of Receiving Party(ies):

Name: CLABER S.p.A.

Street Address: Via Pontebbana, 22

Street Address:

City: FIUME VENETO (PN)

State/Country: Italy Postal Code: 33080

Additional name(s) of conveying party(ies) attached?  Yes  No

Additional name(s) and addresses attached?  Yes  No

3. Nature of Conveyance:

Assignment

Change of Name

Security Agreement

Other:

Merger

Execution Date: 09052008

4. Application Number(s) or Patent Number(s):

Assignment is being filed together with new application and the first execution date of application is : 09052008

Application has been filed already and the application filing date is: -

A. Patent Application Number(s):

B. Issued Patent Number(s):

Additional numbers attached?  Yes  No

5. Name and address of party to whom correspondence concerning this matter should be mailed:

CUSTOMER NUMBER 00136 -or-

JACOBSON HOLMAN PLLC

400 Seventh Street, N.W.

Washington, D.C. 20004-2218

Tel. 202-638-6666

Attorney Docket Number: P2842US0

6. Total number of applications and patents involved: 1

7. Total Fee (37 CFR 3.41): \$ 40.00

Enclosed

Any deficiencies in enclosed fees are authorized to be charged to Deposit Account No. 06-1358.

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8. Statement and Signature:

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

John C. Holman 22,769

September 29, 2008

Name of Person Signing, Reg. No.

Signature

Date

Total number of pages including cover sheet, attachments, and documents: 4

JCH 103-202

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PATENT  
REEL: 021711 FRAME: 0154

**ASSIGNMENT**

In consideration of the sum of One United States Dollar (U.S. \$ 1.00) in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned,

Inventor(s) full name(s) **Gianfranco ROMAN**

hereby sell, assign and transfer to

Assignee Name and Address **CLABER S.p.A.  
Via Pontebbana, 22  
33080 FIUME VENETO (PN) - Italy**

(hereinafter called the Assignee) the entire right, title, and interest in and to any and all improvements which are disclosed in the application for United States Letters Patent entitled

Title of Invention **"Elastic rewinding hose reel with automatic stopping device"**

which application was

Complete either (a) or (b) (a) executed by the undersigned on the 5th day of September 2008

(b) filed on the \_\_\_\_\_ day of \_\_\_\_\_  
Serial No. \_\_\_\_\_

including any and all United States Letters Patents which may be granted therefor and any and all extensions, divisions, reissues, substitutes, renewals, or continuations thereof, and the right to all benefits under the International Convention for the Protection of Industrial Property.

It is hereby authorized and requested that the Commissioner of Patents and Trademarks issue any and all of said Letters Patent, when granted, to said Assignee.

Further, it is agreed that, when requested, without charge to but at the expense of said Assignee, the undersigned will execute all divisional, continuing, substitute, renewal and reissue patent applications; execute all rightful other papers; and generally do everything possible which said Assignee shall consider desirable for aiding in securing and maintaining proper patent application.

Location and date Signed at Milano, this 5th day of September 2008.

Inventor(s) full signature(s)

**Gianfranco ROMAN (Deceased)**

**COMPLETED ON ADDED PAGES**

ADDED PAGE TO ASSIGNMENT FOR SIGNING BY ADMINISTRATOR(TRIX), EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE ON BEHALF OF DECEASED OR INCAPACITATED INVENTOR (37 CFR 1.42 AND 1.43)

I, Franca SERAFIN

(type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs)

hereby declare that I am a citizen of Italy

residing at PASIANO (PN) - Italy - Via Coletti, 24

and that I am executing and signing the declaration to which this is attached as (check one):

- the administrator(trix) of
- executor(trix) of the last will and testament of
- ~~legal representative~~ (or heirs) of Gianfranco ROMAN

Full name of (first, second etc.) deceased or incapacitated inventor Italy

Country of citizenship of deceased or incapacitated inventor PASIANO (PN) - Italy

Residence of deceased or incapacitated inventor Via Coletti, 24 - 33087 PASIANO (PN) - Italy

Post Office Address of deceased or incapacitated inventor

NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled in at the appropriate prior space of the assignment adding the words "deceased-completed on added page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts which the inventor is required to state.

Date: 5 September 2008

Franca Serafin  
(Signature of administrator(trix), executor(trix) legal representative (or all heirs))

ADDED PAGE TO ASSIGNMENT FOR SIGNING BY ADMINISTRATOR(TRIX), EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE ON BEHALF OF DECEASED OR INCAPACITATED INVENTOR (37 CFR 1.42 AND 1.43)

Giada ROMAN

(type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs)

hereby declare that I am a citizen of Italy

residing at CODROIPO (UD) -- Italy - Viale Circonv. Ovest, 3/2

and that I am executing and signing the declaration to which this is attached as (check one):

- the administrator(trix) of
- executor(trix) of the last will and testament of
- ~~legal representative~~ (or all heirs) of

Gianfranco ROMAN

Full name of (first, second etc.) deceased or incapacitated inventor

Italy

Country of citizenship of deceased or incapacitated inventor

PASIANO (PN) - Italy

Residence of deceased or incapacitated inventor

Via Coletti, 24 - 33087 PASIANO (PN) - Italy

Post Office Address of deceased or incapacitated inventor

NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled in at the appropriate prior space of the assignment adding the words "deceased-completed on added page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts which the inventor is required to state.

Date: 5 September 2008

(Signature of administrator(trix), executor(trix) legal representative (or all heirs))