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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
Steven C. Charlton	06/13/2008
Joseph E. Perry	06/18/2008

RECEIVING PARTY DATA

Name:	Bayer Healthcare LLC
Street Address:	555 White Plains Road
Internal Address:	5th Floor
City:	Tarrytown
State/Country:	NEW YORK
Postal Code:	10591

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	12473187

CORRESPONDENCE DATA

Fax Number: (312)425-3909

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

Phone: (312) 425-8515

Email: lpokorny@nixonpeabody.com

Correspondent Name: John C. Gatz

Address Line 1: 300 S. Riverside Plaza

Address Line 2: 16th Floor

Address Line 4: Chicago, ILLINOIS 60606

ATTORNEY DOCKET NUMBER:	247082-000321USPT
NAME OF SUBMITTER:	John C. Gatz

Total Attachments: 3

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REEL: 022747 FRAME: 0479

PATENT

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> PATENT REEL: 022747 FRAME: 0480

ASSIGNMENT

WHEREAS, we, Steven C. Charlton and Joseph E. Perry have invented certain new and useful improvements in the following:

AUTO-CALIBRATION CIRCUIT OR LABEL AND METHOD OF FORMING THE SAME

for which I have made application for United States Letters Patent, the said application having been filed on **May 27, 2009**, as Application No. 12/473,187.

WHEREAS, Bayer HealthCare, LLC, a corporation organized and existing under the laws of the State of New York, having its principal place of business at 555 White Plains Road, Tarrytown, New York, (hereinafter referred to as "ASSIGNEE"), is desirous of acquiring my entire right, title and interest in and to the invention, and in and to the said application and any Letters Patent that may issue thereon;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I do hereby sell, assign and transfer unto ASSIGNEE, its successors, assigns and legal representatives my entire right, title and interest in and to said invention and in and to said application and all patents which may be granted therefore, and all provisionals, divisions, reissues, substitutions, continuations, continuation-in-part and extensions thereof; and I hereby authorize and request the Commissioner of Patents and Trademarks to issue all patents for said invention, or patents resulting therefrom, insofar as my interest is concerned, to the said ASSIGNEE of my entire right, title, and interest.

I also hereby sell and assign to said ASSIGNEE, its successors, assigns and legal representatives the full and exclusive rights, title and interest to the invention disclosed in said application throughout the world, including the right to file applications and obtain patents, utility models, industrial models and designs for said invention in its own name throughout the world, including all rights of priority, all rights to publish cautionary notices reserving ownership of said invention and all rights to register said invention in appropriate registries; and

I further agree to execute any and all powers of attorney, applications, assignments, declarations, affidavits, and any other papers in connection therewith necessary to perfect such rights, title and interest in ASSIGNEE, its successors, assigns and legal representatives.

I hereby further agree that I will communicate to said ASSIGNEE, or its successors, assigns and legal representatives, any facts known to me respecting any improvements; and, at the expense of said ASSIGNEE, to testify in any legal proceedings, sign all lawful papers, execute all provisional, divisional, continuation, continuation-in-part, reissue and substitute applications, make all lawful oaths, and generally do everything possible to vest title in said ASSIGNEE and to aid said ASSIGNEE, its successors, assigns and legal representatives to obtain and enforce proper protection for said invention in all countries.

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, IN WITNESS WI	HEREOF, I have	hereunto set m	y hand and seal this	<u> 5</u> day of
June 2008.		S(C)	led Steve (//
		Name:	Steven C. Charlton	1
		Address:	10275 Douglas Ro	ad
			Osceola, Indiana	46561
State of)			
) ss.:			
County of)			
On this 13 for the State and County the person of the abo acknowledged the same t	aforesaid, persone ove name who	nally appeared signed and s		known by me to be
		Notary Publ	sle R. Vin	cent
My Commission expires:		•		
			SHA R. VINÇENT UBLIC STATE OF INDIANA	

ELKHART COUNTY
MY COMMISSION EXPIRES 12/08/15

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IN WITNESS WHEREOF, I have I	hereunto set my	y hand and seal this 18 day of
	Josep	1 Elevy
	Name:	Joseph E. Perry
	Address:	58075 Potawatomie Drive
		Osceola, Indiana 46561
State of <u>Indiana</u>)		•
State of <u>Indiana</u>) ss.: County of <u>St. Joseph</u>)		
On this day of for the State and County aforesaid, persons person of the above name who signed and the same to be his own free act and deed.	ally appeared J	
	Musto Notary Public	n K. Benton
My Commission expires:	r cottary r don	
10-4- 2015	KRISTIN K. BENTON St. Joseph County My Commission Expire October 4, 2015	

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RECORDED: 05/28/2009

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