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<ul><li>Security Agree</li><li>Joint Research</li></ul>	-	State: Ohio
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	ler 9424, Confirmatory License	Additional name(s) & address(es) attached?  Yes X No
Other		document is being filed together with a new application.
A. Patent Applica		B. Patent No.(s)
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5. Name and a concerning doc	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert	6. Total number of applications and patents involved:
5. Name and a concerning doc Name: <u>Richard</u>	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ	6. Total number of applications and patents involved:         7. Total fee (37 CFR 1.21(h) & 3.41)
5. Name and a concerning doc Name: <u>Richard</u> Internal Address:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18	6. Total number of applications and patents involved:   7. Total fee (37 CFR 1.21(h) & 3.41)   □ Authorized to be charged by credit card
5. Name and a concerning doc Name: <u>Richard</u> Internal Address:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ	<ul> <li>6. Total number of applications and patents involved:1</li></ul>
5. Name and a concerning doc Name: <u>Richard</u> Internal Address:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18	<ul> <li>6. Total number of applications and patents involved:</li></ul>
5. Name and a concerning doc Name: <u>Richard</u> Internal Address: Street Address:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18	<ul> <li>6. Total number of applications and patents involved:</li></ul>
5. Name and a concerning doc Name: <u>Richard</u> Internal Address: Street Address: City: <u>Wright-F</u>	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18 2240 B Street	<ul> <li>6. Total number of applications and patents involved:</li></ul>
5. Name and a concerning doc Name: <u>Richard</u> Internal Address: Street Address: City: <u>Wright-F</u> State: Ohio	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18 2240 B Street Patterson AFB	<ul> <li>6. Total number of applications and patents involved:</li></ul>
5. Name and a concerning doc Name: <u>Richard</u> Internal Address: Street Address: City: <u>Wright-F</u> State: Ohio Phone Number:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18 2240 B Street Patterson AFB Zip: 45433-7109	6. Total number of applications and patents involved:
5. Name and a concerning doc Name: <u>Richard</u> Internal Address: Street Address: City: <u>Wright-F</u> State: Ohio Phone Number: Fax Number:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18 2240 B Street Patterson AFB Zip: 45433-7109 (937) 904-5035	<ul> <li>6. Total number of applications and patents involved:</li></ul>
5. Name and a concerning doc Name: Richard Internal Address: Street Address: City: Wright-F State: Ohio Phone Number: Fax Number: Email Address:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18 2240 B Street Patterson AFB Zip: 45433-7109 (937) 904-5035 (937) 255-3733 richard.lambert@wpafb.af.mil RQLOP	6. Total number of applications and patents involved:         1         7. Total fee (37 CFR 1.21(h) & 3.41)         Authorized to be charged by credit card         Authorized to be charged by credit card         Authorized to be charged to deposit account         Enclosed         None required (government interest not affecting title)         8. Payment Information         a. Credit card         Last 4 Numbers         Expiration Date:         b. Deposit Account Number         Authorized User Name         29 May 2009
5. Name and a concerning doc Name: Richard Internal Address: Street Address: City: Wright-F State: Ohio Phone Number: Fax Number: Email Address:	Additional numbers a ddress to whom correspondence ument should be mailed: A. Lambert AFMCLO/JAZ Bldg 11, Room D -18 2240 B Street Patterson AFB Zip: 45433-7109 (937) 904-5035 (937) 255-3733	6. Total number of applications and patents involved:   1   7. Total fee (37 CFR 1.21(h) & 3.41)   □ Authorized to be charged by credit card   □ Authorized to be charged to deposit account   □ Enclosed   □ None required (government interest not affecting title)   8. Payment Information   a. Credit card   Last 4 Numbers   Expiration Date:   b. Deposit Account Number   Authorized User Name

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> PATENT REEL: 022808 FRAME: 0060

## **CONFIRMATORY INSTRUMENT**

1. NAME OF CONTRACTOR 2. CONTRACT NUMBER Sheet Dynamics, Ltd. | FA 8650-07-C-5210 3. TITLE OF INVENTION Managing Non-Destructive Evaluation Data 4. NAME OF INVENTOR(S) Joseph M. Kesler, Uriah M. Liggett, Richard A. Roth, Thomas D. Sharp 5. SERIAL NUMBER 6. FILING DATE March 12, 2009 12403274 The invention identified above is a "Subject Invention" under Patent Rights Clause 52.227-11, included in Contract Number , with the United (see item 2) States Air Force. This document is confirmatory of the paid-up license granted to the Government under this contract in this invention, patent application, and any resulting patent, and of all rights acquired by the Government by the referenced clause. The Government is hereby granted an irrevocable power to inspect and make copies of the above-identified patent application. BY (SIGNATURE OF CONTRACTOR) (NOTARY SEAL) homas D. SharD CASSANDRA N. BROWN (TYPE NAME) Notary Public, State of Ohio Commission Expires 10-19 TITLE OF CONTRACTOR Principal BUSINESS ADDRESS 1775 Montor Ave Suite 30 Z EXECUTION DATE Cincinnati, OH 45212

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**RECORDED: 06/09/2009**