# PATENT ASSIGNMENT

# Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT	
NATURE OF CONVEYANCE:	Corrective Assignment to correct the Original Cover Sheet, part of the Assignee's address is missing, previously recorded on Reel 018130 Frame 0742. Assignor(s) hereby confirms the Assignment.	

## **CONVEYING PARTY DATA**

Name	Execution Date
Yo Taniguchi	05/31/2006
Shinji Kurokawa	05/31/2006
Hisaaki Ochi	05/31/2006

### **RECEIVING PARTY DATA**

Name:	Hitachi Medical Corporation	
Street Address:	1-14, Uchikanda 1-chome	
Internal Address:	Chiyoda-ku	
City:	Tokyo	
State/Country:	JAPAN	

### PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	10586732

### **CORRESPONDENCE DATA**

Fax Number: (703)312-6666

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

Phone: 7033126600

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ATTORNEY DOCKET NUMBER:	520.46403X00
NAME OF SUBMITTER:	Alan E. Schiavelli

PATENT REEL: 023266 FRAME: 0271 OP \$40.00 10586732

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Total Attachments: 6 source=CoverSheet#page1.tif source=Assignment#page1.tif source=RecReceipt#page1.tif

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**PATENT REEL: 023266 FRAME: 0272** 

Form PTO-1595 (Rev, 10/02) OMB No. 0651-0027 (e: 103283621	VER SHEET U.S. DEPARTMENT OF COLUMN U.S. Patent and Tradems
To the Honorable Commissioner of Patents and Trademarks: P	Attorney Docket No. 520.4
1. Name of conveying party(les): Yo TANIGUCHI Shinji KUROKAWA, Hisaaki OCHI	Name and address of receiving party(ies)     Name: HITACHI MEDICAL CORPORATION
Additional name(s) of conveying party(ies) attached? 🔲 Yes 🖾 No	Street Address: 1-14, Uchlkanda 1-chome Tokyo, Japan
3. Nature of conveyance/ Execution Date: May 31, 2086, May 31, 2006, May 31, 2006	City: State: Zip:
X Assignment	Additional name(s) & address(es) attached? ☐ Yes ⊠
☐ Executive Order 9424, Confirmatory License ☐ Other  I. Application number(s) or petent number(s):	This document is being filed together with a new
application <b>July 21, 2006.</b> A. Patent Application No.(s)  Additional number(s) atta	B. Patent Registration No.(s)
Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved
Name: ANTONELLI, TERRY, STOUT & KRAUS, LLP Internal Address: 1300 NORTH 17 <sup>TH</sup> STREET – SUITE 1800	7. Total fee (37 CFR 3.41)
City: ARLINGTON State: VA Zip 22209  Phone Number: (703) 312-6600  Facsimile Number: (703) 312-6666  Email Address: email@antonelli.com	8. Payment Information:  a. Credit Card Last 4 numbers:1024 Expiration date: 06/10  b. Deposit account number: 01-2135

Total number of pages including cover sheet, attachments, and document: 2

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:

Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

Signature

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

07/27/2006 ATRAN1

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Name of Person Signing

Alan E. Schiavelli, Reg#32,087

04 FC:8021

40.00 OP

**PATENT** 

07/21/2006

Date

REEL: 023266 FRAME: 0273

## **ASSIGNMENT**

(譲渡証)

As a below named inventor, I hereby declare that:

IN CONSIDERATION of the sum of One Dollar (\$1.00) or the equivalent thereof, and other good and valuable consideration paid to me citizen of Japan by Hitachi Medical Corporation, a corporation organized under the laws of Japan, located at 1-14, Uchikanda 1-chome, Chiyoda-ku, Tokyo, Japan, receipt of which is hereby acknowledged I do hereby sell and assign to said Hitachi Medical Corporation, its successors and assigns, all my right, title and Interest, in and for the United States of America, in and to

#### MAGNETIC RESONANCE IMAGER

invented by me (if only one is named below) or us (if plural inventors are named below) and described in the application for United States Letters Patent therefor, executed on even date herewith, and all United States Letters Patent which may be granted therefor, and all divisions, continuations and extensions thereof, the said interest being the entire ownership of the said Letters Patent when granted, to be held and enjoyed by said Hitachi Medical Corporation, its successors, assigns or other legal representatives, to the full end of term for which said Letters Patent may be granted, as fully and entirely as the same would have been held and enjoyed by me or us if this assignment and sale had not been made;

And I hereby agree to sign and execute any further documents or instruments which may be necessary, lawful, and proper in the prosecution of the above-named application or in the preparation and prosecution of any continuing, continuation-in-part, substitute, divisional, renewal, reviewed or reissue applications or in any amendment, extension, or interference proceedings, or otherwise to secure the title thereto in said assignee;

And I do hereby authorize and request the Commissioner of Patents to issue said Letters Patent to said Hitachi Medical Corporation,

Signed on the date(s) indicated aside signatures:

INVENTOR(S) (発明者フルネームサイン)	Date Signed (署名日)
1) Afo Tunguchi	5/31/2006
1) Afo Tunguchi 2) 2 14 6 1/2	5/31/2006
3) Nisaaki OCHI	5/31 /2006
4)	
5)	
6)	
7)	
8)	
9)	
10)	

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**RECORDED: 09/22/2009**