

PATENT ASSIGNMENT

Electronic Version v1.1
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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
TORFINN HAALAND	08/17/2009
OLE MAGNE HOMESTAD	08/14/2009

RECEIVING PARTY DATA

Name:	GE HEALTHCARE AS
Street Address:	P.O. BOX 4220 NYDALEN
Internal Address:	NYCOVEIEN 1-2
City:	OSLO
State/Country:	NORWAY
Postal Code:	N-0401

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	12571457

CORRESPONDENCE DATA

Fax Number: (609)514-6572
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
 Phone: 609-514-6731
 Email: Lori.allaire@ge.com
 Correspondent Name: GE HEALTHCARE, INC.
 Address Line 1: IP DEPARTMENT 101 CARNEGIE CENTER
 Address Line 4: PRINCETON, NEW JERSEY 08540-6231

ATTORNEY DOCKET NUMBER:	PN0954
NAME OF SUBMITTER:	Christine Lee

Total Attachments: 3
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**PATENT
 REEL: 023310 FRAME: 0241**

ASSIGNMENT

For good and valuable consideration of which we acknowledge receipt, We: Torfinn Haaland and Ole Magne Homestad hereby assign to **GE Healthcare AS**, having an address and a place of business at, Nycoveien 1-2, P.O. Box 4220, Nydalen, N-0401 Oslo, Norway and its successors and assigns (collectively hereinafter called “the Assignee”), our entire right, title and interest throughout the world to the invention and improvements invented and originated by us as described in an application for United States Patent filed on July 21, 2009, U.S. Serial No. 61/227,086 entitled “**METHOD FOR REDUCING AMINOISOPHTHALIC ACID BISAMIDE RELATED IMPURITIES IN PREPARATION OF NON-IONIC X-RAY CONTRAST AGENTS**”, and any and all applications for patents and patents therefrom in any and all countries, including all divisions, continuations, reexaminations, reissues, continuations-in-part and extensions thereof, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our names or in its own name for patents and the like rights of exclusion and for inventor’s certificates for said inventions and improvements; and we agree for ourselves and our heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this Assignment. Assignor hereby authorizes and requests the Commissioner of Patents and Trademarks to issue any and all Letters Patent referred to above to the Assignee, as the Assignee of the entire right, title and interest in and to the same, for the Assignee’s sole use and behoof and for the use and behoof of the Assignee’s legal representatives, successors and assigns, to the full end of the term for which such Letters Patent may be granted, as fully and entirely as the same would have been held by the Assignor had this assignment and sale not been made.

INVENTOR 1 Torfinn Haaland

Docket No.: PN0954

Signature: Torfinn Haaland

Date: 17/8 09

Witnessed by: Thore Jarle Sprensen
Signature

Date: 17/8 09

THORE JARLE SPRENSSEN
Printed Name of Witness

Witnessed by: Inger D. Saanum
Signature

Date: 17/8-09

INGER D. SAANUM
Printed Name of Witness

SECTION BELOW IS FOR USE ONLY IF SIGNING IN THE PRESENCE OF A NOTARY

Signature: _____

Date: _____

State of _____)

County of _____)

Before me personally came the above-named *****, to me personally known as the individual who executed the foregoing assignment, who acknowledged to me that he/she executed the same of his/her own free will for the purposes therein set forth on this ____ day of _____, 2009.

Seal

(Notary Public)

INVENTOR 2 Ole Magne Homestad

Docket No.: PN0954

Signature: O. M. Homestad

Date: 14. aug 2009

Witnessed by: Aslaug Birkealand
Signature

Date: 14/8-09

ASLAUG BIRKELAND
Printed Name of Witness

Witnessed by: Brita Blørstad
Signature

Date: 14.08.09

BRITA BLØRSTAD
Printed Name of Witness

SECTION BELOW IS FOR USE ONLY IF SIGNING IN THE PRESENCE OF A NOTARY

Signature: _____

Date: _____

State of _____)

County of _____)

Before me personally came the above-named *****, to me personally known as the individual who executed the foregoing assignment, who acknowledged to me that he/she executed the same of his/her own free will for the purposes therein set forth on this _____ day of _____, 2009.

Seal

(Notary Public)