U.S. PTO 12/656122 01/19/2010

-	
0,	
/2	
\sim	
8	
~	
•	

4. Application or patent number(s): A. Patent Application No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: B. Patent No.(s) 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 X Authorized to be charged to deposit account Enclosed Deposit Account Numbers (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ January 19, 2010	Form POSZ-1595-PLG (Rev. 08/05) OMB No. 0651-0027 (exp. 6/30/2008)	U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office	
To the Director of the U.S. Patent and 1. Name of conveying party(les) (1): Makoto KAMIYA (2): Manabu OZAKI Addisonal name(s) of conveying party(se) attached? Yes X No 3. Nature of conveyance/Execution Date(s): Execution Date(s): (1), (2): January 8, 2010 X Assignment Merger Security Agreement Change of Name Joint Research Agreement Change of Name Additional name(s) & address(es) attached? Yes X No 4. Application or patent number(s): A. Patent Application No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: ANDEN CO., LTD. Street Address: 10-BANCHI, 1-CHOME SASAME-CHO City: ANJO-CITY State: AICHI-PREF. Country: JAPAN Zip: 446-8503 This document is being filed together with a new application. B. Patent No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 120-BANCHI, 1-CHOME Street Address(es) attached? Yes X No 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$.49 X Authorized to be charged by credit card X Authorized to be charged by credit card X Authorized to be charged to deposit account Enclosed School S	I PRESE CEN PROPERTY OF THE PR	Attorney docket: 06-014	
1. Name of conveying party(les) (1): Makoto KAMIYA (2): Manabu OZAKI Additional name(s) of conveying party(s) attached?			
(1): Makoto KAMIYA (2): Manabu OZAKI Additional name(s) of conveying party(ies) attached? Yes X No 3. Nature of conveyance/Execution Date(s): Execution Date(s): (1), (2): January 8, 2010 X Assignment Merger Change of Name Joint Research Agreement Change of Name Joint Research Agreement Additional name(s) & address(es) attached? Yes X No 4. Application or patent number(s): A Patent Application No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: ANDEN CO., LTD. Street Address: 10-BANCHI, 1-CHOME SASAME-CHO City: ANJO-CITY State: AICHI-PREF. Country: JAPAN Zip: 446-8503 Additional name(s) & address(es) attached? Yes X No 6. Total name(s) & address(es) attached? No S. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ NAW GROUP, PLC State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: Xes Xip: 20191 Phone Number: (703) 707-9112 Email Address: Xes Xip: 20191 Phone Required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ January 19, 2010	To the Director of the U.S. Patent and	:uments or the new address(es) below.	
Street Address: 10-BANCHI, 1-CHOME SASAME-CHO City: ANJO-CITY State: AlCHI-PREF. Country: JAPAN Zip: 446-8503 Zip: 20191	1. Name of conveying party(ies)	2. Name and address of receiving party(ies)	
(2): Manabu OZAKI Additional name(s) of corresying party(se) attached?	(1): Makoto KAMIYA	Name: ANDEN CO., LTD.	
SASAME-CHO SASAME-CHO City: ANJO-CITY			
Additional name(s) of conveying party(es) attached? Yes X No 3. Nature of conveyance/Execution Date(s): Execution Date(s): [1], (2): January 8, 2010 X Assignment Merger Security Agreement Change of Name Joint Research Agreement Government Interest Assignment Executive Order 9424, Confirmatory License Other 4. Application or patent number(s): A. Patent Application No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: AICHI-PREF. Country: JAPAN Zip: 446-8503 Additional name(s) & address(es) attached? Yes X No 6. Total number of glied together with a new application. B. Patent No.(s) 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 X Authorized to be charged to deposit account Enclosed Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address:			
Execution Date(s): (1), (2): January 8, 2010 X Assignment			
X Assignment	•		
Security Agreement			
Joint Research Agreement Government Interest Assignment Executive Order 9424, Confirmatory License Additional name(s) & address(es) attached? Yes X No		Country: <u>JAPAN</u> Zip: <u>446-8503</u>	
Government Interest Assignment Executive Order 9424, Confirmatory License Other			
Executive Order 9424, Confirmatory License	1 =		
Additional name(s) & address(es) attached? Yes X No 4. Application or patent number(s): A. Patent Application No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: Email Address: B. Patent No.(s) 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 X Authorized to be charged by credit card X 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 50-1147 Authorized User Name DAVID G. POSZ			
4. Application or patent number(s): A. Patent Application No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: Email Address: B. Patent No.(s) 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 X Authorized to be charged by credit card Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ	Executive Order 9424, Confirmatory License		
A. Patent Application No.(s) Additional numbers attached?	Other	Additional name(s) & address(es) attached? Yes X No	
A. Patent Application No.(s) Additional numbers attached? Yes X No 5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: B. Patent No.(s) 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 X Authorized to be charged by credit card X Authorized to be charged to deposit account interest not affecting title) B. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ January 19, 2010	4. Application or patent number(s):		
5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: Email Address: Benefit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 4. Total number of applications and patents involved: 1. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 X Authorized to be charged by credit card X 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 50-1147 Authorized User Name DAVID G. POSZ	■	B. Patent No.(s)	
5. Name and address to whom correspondence concerning document should be mailed: Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: Email Address: B. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 4 Authorized User Name DAVID G. POSZ			
Involved:1			
Name: DAVID G. POSZ POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: Email Address: Begin and the street of the charged to deposit account of the c			
POSZ LAW GROUP, PLC Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address:	_		
Street Address: 12040 SOUTH LAKES DRIVE, SUITE 101 City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 9. Signature: January 19, 2010		, _	
City: RESTON State: VA Zip: 20191 Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 9. Signature: January 19, 2010			
State:VA Zip: 20191 Enclosed Phone Number: (703) 707-9110 None required (government interest not affecting title) Fax Number: (703) 707-9112 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 9. Signature: January 19, 2010		X Authorized to be charged to deposit account	
Phone Number: (703) 707-9110 Fax Number: (703) 707-9112 Email Address: a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ January 19, 2010		Enclosed	
Fax Number: (703) 707-9112 Email Address: a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 9. Signature: January 19, 2010		None required (government interest not affecting title)	
a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 9. Signature: January 19, 2010		8 Payment Information	
b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 9. Signature: January 19, 2010	Email Address:		
b. Deposit Account Number 50-1147 Authorized User Name DAVID G. POSZ 9. Signature: January 19, 2010		a. Credit Card Last 4 Numbers	
Authorized User Name DAVID G. POSZ 9. Signature:			
9. Signature:		b. Deposit Account Number 50-1147	
	·	Authorized User Name DAVID G. POSZ	
	9 Signature:	lanuary 10, 2010	
	Signature Signature	Date	
Total number of pages including cover sheet, attachments, and documents: 2	DAVID G. POSZ (REG. NO. 37.701)		
Name of Person Signing			

01/20/2010 SMOHAHME 00000011 12656122

04 FC:8021

40.00 OP

Attomey Docket No. 06-014
09-13-US-JN/nk

ASSIGNMENT

For good and valuable consideration, the receipt and sufficiency of which is hereby expressly acknowledged, the undersigned hereby agree(s) to assign, and hereby sell(s), assign(s) and transfer(s) to

ANDEN CO., LTD., 10-banchi, 1-chome, Sasame-cho, Anjo-city, Aichi-pref., 446-8503 Japan as Assignee, and its successors, assigns or other legal representatives, the entire right, title and interest, in the United States of America and its territories, dependencies and possessions, to certain inventions known as ELECTROMAGNETIC RELAY described in an application for Letters Patent of the United States executed X on even date herewith as U.S. Application Serial No. filed on as well as any and all continuations, divisions; and reissues of said application and all Letters Patents that may be granted therefor. The undersigned hereby authorize(s) and request(s) the United States Commissioner of Patents and Trademarks to issue said Letters Patent or Letters Patents to said Assignee. The undersigned agree(s), when requested, to sign all papers, take all rightful oaths, and perform all acts which may be necessary for securing and maintaining patents for said inventions and for vesting title thereto in said Assignee. The undersigned authorize(s) and empower(s) said Assignee to invoke and claim the benefit of the right of priority provided under any and all international conventions and treaties in respect of said inventions, as may be necessary in connection with said application. The undersigned also authorize(s) Posz Law Group, PLC to insert hereon any further identification that may be necessary or desirable for recordation of this document. makoto Kamiya

Inventor 1: Makoto Kamiya

Manabu Ozaki

Date

Jiroshi Sakakibara

Witness

January 8, 2010

Jiroshi Sakakibara

Date

Witness

Date

Witness

RECORDED: 01/19/2010

PATENT

REEL: 023855 FRAME: 0075