

PATENT ASSIGNMENT

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Masanari TAKABATAKE	03/08/2011
RECEIVING PARTY DATA	
Name:	PFU LIMITED
Street Address:	98-2, Nu, Unoke, Kahoku-shi
City:	Ishikawa
State/Country:	JAPAN
Postal Code:	929-1192
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	13047138
CORRESPONDENCE DATA	
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ATTORNEY DOCKET NUMBER:	050083-0278
NAME OF SUBMITTER:	Stephen A. Becker
Total Attachments: 2 source=050083-0278_asgn#page1.tif source=050083-0278_asgn#page2.tif	

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PATENT
REEL: 025947 FRAME: 0812

RECORDATION FORM COVER SHEET

Docket No.: 050083-0278

PATENTS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of Conveying Party(ies)

Masanari TAKABATAKE

Additional name(s) of conveying party(ies) attached? ☐ Yes ☐ No

3. Nature of Conveyance/Execution Date(s)

Execution Date(s): **March 8, 2011**

- ☒ **Assignment**
☐ **Merger**
☐ **Security Agreement**
☐ **Change of Name**
☐ **Joint Research Agreement**
☐ **Government Interest Assignment**
☐ **Executive Order 9424, Confirmatory License**
☐ **Other**

2. Name and address of receiving party(ies)

Name: **PFU LIMITED**

Internal Address:

Address: **98-2, Nu, Unoke, Kahoku-shi, Ishikawa 929-1192 JAPAN**

Additional name(s) & address(es) attached? ☐ Yes ☐ No

☒ **This document is being filed together with a new application.**

B. Patent No(s).

4. Application or patent number(s):

A. Patent Application No(s).

Additional numbers attached? ☐ Yes ☐ No

5. Name and address to whom correspondence concerning document should be mailed:

Name: **MCDERMOTT WILL & EMERY LLP**

Internal Address:

Street Address: **600 13th Street, N.W.**

City: **Washington, D.C.** State: **DC** Zip: **20005-3096**

Phone Number: **202.756.8000**

Fax Number: **202.756.8087**

Email Address:

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 1.21(h) & 3.41) \$40.00

- ☐ **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 **500417**
Authorized User Name _____

9. Signature.

Stephen A. Becker 26,527

Name and Registration No. of Person Signing

Signature

March 14, 2011

Date

Total number of pages including cover sheet, attachments and documents:

2

PATENT

REEL: 025947 FRAME: 0813

