

Form PTO-1595 (Rev. 03-11)  
OMB No. 0651-0027 (exp. 03/31/2012)

U.S. DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office

# RECORDATION FORM COVER SHEET

## 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):

Robert Dominik (03/22/2012) and This Aebi  
(03/13/2012)

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

### 3. Nature of conveyance/Execution Date(s):

Execution Date(s): in parentheses after inventor name

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

### 2. Name and address of receiving party(ies)

Name: Stryker Trauma AG

Internal Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Bohnackerweg 1

City: Selzach

State: \_\_\_\_\_

Country: Switzerland Zip: CH-2545

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

### 4. Application or patent number(s):

A. Patent Application No.(s)

13/392,157

☐ This document is being filed together with a new application.

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

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

Name: Raymond W. Augustin  
LERNER, DAVID, LITTENBERG,  
KRUMHOLZ & MENTLIK, LLP

Internal Address: Atty. Dkt.: TRAUMA 3.3-679

Street Address: 600 South Avenue West

City: Westfield

State: NJ Zip: 07090

Phone Number: 908-654-5000

Fax Number: 908-654-7866

Email Address: ataylor@1d1km.com

### 6. Total number of applications and patents involved:

1

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

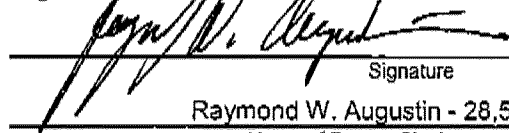
- ☒ Authorized to be charged to deposit account  
☐ Enclosed  
☐ None required (government interest not affecting title)

### 8. Payment Information

Deposit Account Number 12-1095

Authorized User Name Raymond W. Augustin

### 9. Signature:

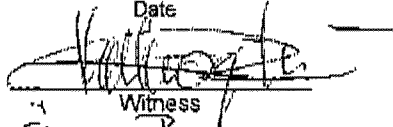

  
 Signature  
Raymond W. Augustin - 28,588  
 Name of Person Signing

April 23, 2012

Date

Total number of pages including cover sheet, attachments, and documents: 3

former PTO/SB/15 (8-00) Modified LDL&amp;M

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| <b>ASSIGNMENT OF UTILITY APPLICATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Docket Number (Optional)<br><b>TRAUMA 3.3-879</b> |
| <p>Whereas, I, <u>Robert Dominik</u> of<br/> <u>Chemin du Lac 5: CH-1291 Commugny, SWITZERLAND</u><br/>         hereafter referred to as assignor, have with others invented certain new and useful improvements in<br/> <u>SURGICAL CLAMPING DEVICE</u></p> <p><input checked="" type="checkbox"/> for which an application for a United States Letters Patent was filed on <u>February 24, 2012</u><br/>         Application Number <u>13/392,157</u></p> <p><input type="checkbox"/> for which an application for a United States Letters Patent was executed by me on _____</p> <p><input checked="" type="checkbox"/> for which an International Application was filed on <u>August 28, 2009</u>, as<br/> <u>PCT/EP2009/006265</u>, designating the United States.</p> <p>And</p> <p>Whereas, <u>Stryker Trauma AG</u><br/>         a corporation of <u>Switzerland</u> herein referred to as "assignee" whose mailing address is<br/> <u>Bohnackerweg 1: CH-2545 Seizach: SWITZERLAND</u><br/>         is desirous of acquiring the entire right, title and interest in the same;</p> <p>NOW, THEREFORE, in consideration of the sum of <u>one</u> dollar (\$ <u>1.00</u>), the receipt whereof<br/>         is acknowledged, and other good and valuable consideration, I as assignor hereby sell, assign and set over to said<br/>         assignee my entire right, title and interest for the United States of America and all other countries in and to said<br/>         invention and the aforesaid utility patent application and all original, divisional, continuation, substitute or reissue<br/>         applications and patents applied for or granted therefor in the United States of America and all other countries, for<br/>         said invention, including without limitation all applications and patents for said invention claiming priority or benefit of<br/>         the aforesaid utility application pursuant to any law or treaty, and including all claims for damages by reason of past<br/>         infringement with the right to sue for and collect the same for its own use and the use of its successors, assigns and<br/>         legal representatives, and including the right to claim such priority or benefit and the Commissioner of Patents and<br/>         Trademarks is hereby authorized and requested to issue all patents on said improvements or resulting therefrom to<br/>         said assignee herein, as assignee of the entire interest therein; and the undersigned for me and my legal<br/>         representatives, heirs and assigns do hereby agree and covenant without further remuneration, to execute and deliver<br/>         all original, divisional, continuation, reissue and other applications for Letters Patent on said improvements and all<br/>         assignments thereof to said assignee or its assigns, to communicate to said assignee or its representatives all facts<br/>         known to the undersigned respecting said improvements, whenever requested, to testify in any interferences or other<br/>         legal proceedings in which any of said applications or patents may become involved, to sign all lawful papers, make<br/>         all rightful oaths, and to do generally everything necessary to aid assignee, its successors, assigns and nominees to<br/>         obtain patent protection for said improvements in all countries, the expenses incident to said applications to be borne<br/>         and paid by said assignee.</p> <p>And I do hereby authorize my attorneys to insert on this deed the filing date and application number of said application<br/>         when known.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;"> <p><u>22 Mars 2012</u><br/>             Date</p> <p><br/>             Witness</p> <p><u>Care Bergeron</u><br/>             Typed Name of Witness</p> </div> <div style="text-align: center;"> <p><br/>             Robert Dominik</p> </div> </div> |                                                   |
| <input checked="" type="checkbox"/> *Total of <u>2</u> forms are submitted.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                   |

1.D-515\

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Form PTO/SB/15 (8-03) Modified LDK&amp;M

|                                          |                                                   |
|------------------------------------------|---------------------------------------------------|
| <b>ASSIGNMENT OF UTILITY APPLICATION</b> | Docket Number (Optional)<br><b>TRAUMA 3.3-679</b> |
|------------------------------------------|---------------------------------------------------|

Whereas, I, This Aebl of  
Freiestrasse 58; CH-2540 Grenchen; SWITZERLAND  
 hereafter referred to as assignor, have with others invented certain new and useful improvements in  
SURGICAL CLAMPING DEVICE

☒ for which an application for a United States Letters Patent was filed on February 24, 2012  
 Application Number 13/392,157

☐ for which an application for a United States Letters Patent was executed by me on \_\_\_\_\_


☒ for which an International Application was filed on August 28, 2009, as  
PCT/EP2009/006265, designating the United States.

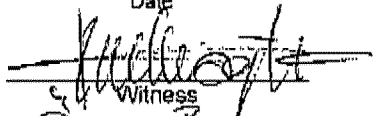
And

Whereas, Stryker Trauma AG  
 a corporation of Switzerland herein referred to as "assignee" whose mailing address is  
Bohnackerweg 1; CH-2545 Selzach; SWITZERLAND  
 is desirous of acquiring the entire right, title and interest in the same;

NOW, THEREFORE, in consideration of the sum of one dollar (\$ 1.00), the receipt whereof is acknowledged, and other good and valuable consideration, I as assignor hereby sell, assign and set over to said assignee my entire right, title and interest for the United States of America and all other countries in and to said invention and the aforesaid utility patent application and all original, divisional, continuation, substitute or reissue applications and patents applied for or granted therefor in the United States of America and all other countries, for said invention, including without limitation all applications and patents for said invention claiming priority or benefit of the aforesaid utility application pursuant to any law or treaty, and including all claims for damages by reason of past infringement with the right to sue for and collect the same for its own use and the use of its successors, assigns and legal representatives, and including the right to claim such priority or benefit and the Commissioner of Patents and Trademarks is hereby authorized and requested to issue all patents on said improvements or resulting therefrom to said assignee herein, as assignee of the entire interest therein; and the undersigned for me and my legal representatives, heirs and assigns do hereby agree and covenant without further remuneration, to execute and deliver all original, divisional, continuation, reissue and other applications for Letters Patent on said improvements and all assignments thereof to said assignee or its assigns, to communicate to said assignee or its representatives all facts known to the undersigned respecting said improvements, whenever requested, to testify in any interferences or other legal proceedings in which any of said applications or patents may become involved, to sign all lawful papers, make all rightful oaths, and to do generally everything necessary to aid assignee, its successors, assigns and nominees to obtain patent protection for said improvements in all countries. the expenses incident to said applications to be borne and paid by said assignee.

And I do hereby authorize my attorneys to insert on this deed the filing date and application number of said application when known.

13. März 2012  
 Date  
  
 This Aebl

  
 Witness  
Georg Bernegger  
 Typed Name of Witness

|                                     |                                         |
|-------------------------------------|-----------------------------------------|
| <input checked="" type="checkbox"/> | *Total of <u>2</u> forms are submitted. |
|-------------------------------------|-----------------------------------------|

1.D-5151