

PATENT ASSIGNMENT

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SUBMISSION TYPE:	NEW ASSIGNMENT										
NATURE OF CONVEYANCE:	ASSIGNMENT										
CONVEYING PARTY DATA											
<table border="1"> <thead> <tr> <th>Name</th> <th>Execution Date</th> </tr> </thead> <tbody> <tr> <td>Daniel Birtwhistle</td> <td>05/09/2012</td> </tr> <tr> <td>Raymond Strickland</td> <td>05/09/2012</td> </tr> </tbody> </table>		Name	Execution Date	Daniel Birtwhistle	05/09/2012	Raymond Strickland	05/09/2012				
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RECEIVING PARTY DATA											
<table border="1"> <tr> <td>Name:</td> <td>Roche Diagnostics Operations, Inc.</td> </tr> <tr> <td>Street Address:</td> <td>9115 Hague Road</td> </tr> <tr> <td>City:</td> <td>Indianapolis</td> </tr> <tr> <td>State/Country:</td> <td>INDIANA</td> </tr> <tr> <td>Postal Code:</td> <td>46250</td> </tr> </table>		Name:	Roche Diagnostics Operations, Inc.	Street Address:	9115 Hague Road	City:	Indianapolis	State/Country:	INDIANA	Postal Code:	46250
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PROPERTY NUMBERS Total: 1											
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CORRESPONDENCE DATA											
<p>Fax Number: (317)521-2883 Phone: 317-521-2851 Email: karla.dirks@roche.com <i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i> Correspondent Name: Eric R. Waldkoetter Address Line 1: 9115 Hague Road Address Line 4: Indianapolis, INDIANA 46250</p>											
ATTORNEY DOCKET NUMBER:	27321 US-DC										
NAME OF SUBMITTER:	Eric R. Waldkoetter										
<p>Total Attachments: 3 source=Assignment - Inventors to RDO#page1.tif source=Assignment - Inventors to RDO#page2.tif source=Assignment - Inventors to RDO#page3.tif</p>											

CH \$40.00 13434298

PATENT

Assignment of Rights, Title and Interest in Invention
(Multiple inventors; single assignee)

Docket No.
27321 US-dc

This is an Assignment of the following rights, title and interest: (check all that apply):

☒ *United States of America rights, title and interest in the invention*

☐ *Foreign rights, title and interest in the invention*

☒ *United States Patent Application Serial No. 13/434,298*

Date of Execution: _____ *Date of Filing:* March 29, 2012

☐ *United States Provisional Patent Application Serial No.* _____

☐ *United States Patent No(s).* _____

☐ *International (PCT) Patent Application Serial No.* _____

☐ *Other (specify)* _____

Title of the Invention

MEDICAL DEVICE WITH SECURE DATA TRANSMISSION

Inventors (assignors)

<i>Name</i>	<i>Address</i>
Daniel Birtwhistle	9680 Conifer Court, Fishers, Indiana 46037
Raymond Strickland	41 N. Harbison Avenue, Indianapolis, Indiana 46219

Assignee

<i>Name</i>	<i>Address</i>
Roche Diagnostics Operations, Inc.	9115 Hague Road Indianapolis, IN 46250

Assignment of Rights, Title and Interest in Invention
(Multiple inventors; single assignee)

Docket No.
27321 US-dc

Whereas we, the above-identified Inventors, have invented certain new and useful improvements in the Invention identified above and described in the above-identified patent application(s) and/or patent(s) (hereinafter referred to as "Invention");

And whereas we desire to assign our above-identified rights; title and interest in the Invention to the above-identified Assignee;

Now, this indenture witnesseth, that for good and valuable consideration, the receipt whereof is hereby acknowledged;

We hereby assign, sell and transfer our above-identified rights, title and interest in said Invention, said application(s) as identified above, including any divisions, continuations, and continuations-in-part thereof, and in and to any and all Letters Patent of the United States, and countries foreign thereto, which may be granted or have granted for said Invention, and in and to any and all reissues and reexaminations thereof, and in and to any and all priority rights, Convention rights, and other benefits accruing or to accrue to us with respect to the filing of applications for patents or securing of patents in the United States and countries foreign thereto, unto said Assignee;

And we hereby authorize and request the Director of the United States Patent and Trademark Office to issue any United States Letters Patent which may issue for said Invention to said Assignee, as assignee of the whole right, title and interest thereto;

And we further agree to sign and execute all necessary and lawful future documents, including applications for foreign patents, for filing divisions, continuations and continuations-in-part of said application for patent, and/or, for obtaining any reissue or reissues of any Letters Patent which may be granted for my aforesaid Invention, as the Assignee or its Designee(s) may from time to time require and prepare at its own expense.

Inventor's Signatures

WITNESS Assignor's hand this 9 day of May, 20 12.


Daniel Birtwhistle

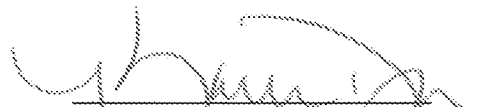
STATE OF Indiana) SS:
COUNTY OF Marion)

On this the 9th day of May, 20 12, before me Karla Dirks, the undersigned Notary Public, personally appeared Daniel Birtwhistle,

- ☒ personally known to me
☐ proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed the same for purposes therein stated.

WITNESS my hand and official seal.


Notary Public

My Commission Expires:

May 17, 2015



WITNESS Assignor's hand this 9th day of May, 2012.

Raymond Strickland
Raymond Strickland

STATE OF Indiana)
COUNTY OF Marion) SS:

On this the 9th day of May, 2012, before me Karla Dirks, the undersigned Notary Public, personally appeared Raymond Strickland,

- ☒ personally known to me
☐ proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed the same for purposes therein stated.

WITNESS my hand and official seal.

Karla Dirks
Notary Public

My Commission Expires:

May 17, 2015



WITNESS Assignor's hand this ____ day of _____, 20____.

STATE OF _____)
COUNTY OF _____) SS:

On this the ____ day of _____, 20____, before me _____, the undersigned Notary Public, personally appeared _____,

- ☐ personally known to me
☐ proved to me on the basis of satisfactory evidence

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Notary Public

My Commission Expires:
