

## 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>Evangelyn C. Alocilja</td> <td>10/06/2012</td> </tr> <tr> <td>Michael J. Anderson</td> <td>09/01/2012</td> </tr> </tbody> </table>		Name	Execution Date	Evangelyn C. Alocilja	10/06/2012	Michael J. Anderson	09/01/2012				
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RECEIVING PARTY DATA											
<table border="1"> <tr> <td>Name:</td> <td>Board of Trustees of Michigan State University</td> </tr> <tr> <td>Street Address:</td> <td>450 Administration Building</td> </tr> <tr> <td>City:</td> <td>East Lansing</td> </tr> <tr> <td>State/Country:</td> <td>MICHIGAN</td> </tr> <tr> <td>Postal Code:</td> <td>48824</td> </tr> </table>		Name:	Board of Trustees of Michigan State University	Street Address:	450 Administration Building	City:	East Lansing	State/Country:	MICHIGAN	Postal Code:	48824
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PROPERTY NUMBERS Total: 1											
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CORRESPONDENCE DATA											
<p>Fax Number: 5174874700  <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i></p> <p>Phone: 517-487-4780</p> <p>Email: runger@dickinsonwright.com</p> <p>Correspondent Name: Steven M. Parks</p> <p>Address Line 1: 215 S. Washington Square</p> <p>Address Line 2: Suite 200</p> <p>Address Line 4: Lansing, MICHIGAN 48933</p>											
ATTORNEY DOCKET NUMBER:	59910-2923										
NAME OF SUBMITTER:	Steven M. Parks										
<p>Total Attachments: 3</p> <p>source=59910-2923_Assignment#page1.tif</p> <p>source=59910-2923_Assignment#page2.tif</p> <p>source=59910-2923_Assignment#page3.tif</p>											

OP \$40.00 13598160

## ASSIGNMENT

As a below-named inventor, I hereby declare that:

My post office address is as stated below under my signature and I am named as a co-inventor of the inventions (herein INVENTIONS) as described in the patent application (herein APPLICATION) identified below along with co-inventor Barbara Christine Cloutier of The United States of America, as represented by the Secretary of the Army.

**Title:** Extraction and Detection of Pathogens Using Carbohydrate-Functionalized Biosensors

**Inventors:** Evangelyn C. Alocilja, Barbara Christine Cloutier, and Michael J. Anderson

**Serial Number:** 13/598,160

**Filing Date:** August 29, 2012

**Attorney Docket:** 59910-2923

In view of valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and further in view of my obligations respecting "University Inventions" as set forth in the current version of the MSU Faculty Handbook, I do hereby assign and transfer unto THE BOARD OF TRUSTEES OF MICHIGAN STATE UNIVERSITY, 450 Hannah Administration Building, East Lansing, MI 48824 (herein ASSIGNEE), my entire right, title and interest in and to the INVENTIONS, the APPLICATION and the right of priority thereto, and all related applications (including provisional applications, non-provisional regular applications, divisions, reissues, continuations, and extensions thereof, whether or not claiming priority to the APPLICATION) and all counterparts in other countries and any and all Letters Patent (and certificates of invention or similar certificates) (herein PATENTS) which may be granted based upon the INVENTIONS or the APPLICATION or related applications or counterparts in other countries, this assignment being applicable throughout the world; and I do hereby agree to assign and transfer unto ASSIGNEE, its successors or assigns, on like terms as set forth in this Assignment, my entire right, title and interest in and to any continuation-in-part applications related to the APPLICATION or to any other related applications herein assigned.

I agree that I will communicate ASSIGNEE or its designated representatives any material facts known to me respecting the INVENTIONS and/or the APPLICATION; testify in any legal proceedings respecting the INVENTIONS; and execute any and all papers deemed necessary by ASSIGNEE, its successors or assigns, to secure the rights herein assigned.

I authorize ASSIGNEE or its representatives to complete the Application Serial Number and Filing Date of the APPLICATION, once known, if that information is not specified above as of the date of my signature hereto.

I hereby represent and warrant that I have not granted any rights inconsistent with the rights granted herein.

FULL NAME OF INVENTOR : Evangelyn C. Alocilja  
Inventor's signature : *Evangelyn C. Alocilja* Date 10/6/2012  
Residence : East Lansing, Michigan 48823  
Citizenship : US  
Post Office Address : 1261 Marigold Avenue  
East Lansing, MI 48823

Signed and witnessed in the presence of:

*Wanyu Lin*  
Wanyu Lin  
(Typed or printed name of witness)

WAN-YU LIN  
NOTARY PUBLIC, STATE OF MI  
COUNTY OF INGHAM  
MY COMMISSION EXPIRES May 19, 2016  
ACTING IN COUNTY OF Ingham  
Notarized for Evangelyn C. Alocilja

I hereby represent and warrant that I have not granted any rights inconsistent with the rights granted herein.

FULL NAME OF INVENTOR : Michael J. Anderson  
Inventor's signature : \_\_\_\_\_ Date \_\_\_\_\_  
Residence : Manassas, Virginia 20110  
Citizenship : US  
Post Office Address : 9202 Fry Street, Apt. 105  
Manassas, VA 20110

Signed and witnessed in the presence of:

\_\_\_\_\_  
\_\_\_\_\_  
(Typed or printed name of witness)

I authorize ASSIGNEE or its representatives to complete the Application Serial Number and Filing Date of the APPLICATION, once known, if that information is not specified above as of the date of my signature hereto.

I hereby represent and warrant that I have not granted any rights inconsistent with the rights granted herein.

FULL NAME OF INVENTOR : Evangelyn C. Alocilja

Inventor's signature : \_\_\_\_\_ Date \_\_\_\_\_  
Residence : East Lansing, Michigan 48823

Citizenship : US  
Post Office Address : 1261 Marigold Avenue  
East Lansing, MI 48823

Signed and witnessed in the presence of:

\_\_\_\_\_  
\_\_\_\_\_  
(Typed or printed name of witness)

I hereby represent and warrant that I have not granted any rights inconsistent with the rights granted herein.

FULL NAME OF INVENTOR : Michael J. Anderson

Inventor's signature : *Michael J. Anderson* Date 01 SEP 12  
Residence : Manassas, Virginia 20110

Citizenship : US  
Post Office Address : 9202 Fry Street, Apt. 105  
Manassas, VA 20110

Signed and witnessed in the presence of:

*Dayna R. Beltranol*  
\_\_\_\_\_  
(Typed or printed name of witness)

