

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT2581373

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>JAMES M. BRUGGER</td> <td>08/15/2011</td> </tr> <tr> <td>STEVEN C. ALFORD</td> <td>08/11/2011</td> </tr> <tr> <td>WILLIAM SCHNELL</td> <td>08/11/2011</td> </tr> <tr> <td>MARK FLORENCE</td> <td>08/11/2011</td> </tr> </tbody> </table>		Name	Execution Date	JAMES M. BRUGGER	08/15/2011	STEVEN C. ALFORD	08/11/2011	WILLIAM SCHNELL	08/11/2011	MARK FLORENCE	08/11/2011
Name	Execution Date										
JAMES M. BRUGGER	08/15/2011										
STEVEN C. ALFORD	08/11/2011										
WILLIAM SCHNELL	08/11/2011										
MARK FLORENCE	08/11/2011										
RECEIVING PARTY DATA											
<table border="1"> <tr> <td>Name:</td> <td>NXSTAGE MEDICAL, INC.</td> </tr> <tr> <td>Street Address:</td> <td>350 MERRIMACK STREET</td> </tr> <tr> <td>City:</td> <td>LAWRENCE</td> </tr> <tr> <td>State/Country:</td> <td>MASSACHUSETTS</td> </tr> <tr> <td>Postal Code:</td> <td>01843</td> </tr> </table>		Name:	NXSTAGE MEDICAL, INC.	Street Address:	350 MERRIMACK STREET	City:	LAWRENCE	State/Country:	MASSACHUSETTS	Postal Code:	01843
Name:	NXSTAGE MEDICAL, INC.										
Street Address:	350 MERRIMACK STREET										
City:	LAWRENCE										
State/Country:	MASSACHUSETTS										
Postal Code:	01843										
PROPERTY NUMBERS Total: 1											
<table border="1"> <thead> <tr> <th>Property Type</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>Application Number:</td> <td>13939150</td> </tr> </tbody> </table>		Property Type	Number	Application Number:	13939150						
Property Type	Number										
Application Number:	13939150										
CORRESPONDENCE DATA											
<p>Fax Number: (703)610-8686</p> <p>Phone: 703-903-9000</p> <p>Email: cgibson@milesstockbridge.com</p> <p><i>Correspondence will be sent via US Mail when the email attempt is unsuccessful.</i></p> <p>Correspondent Name: MARK A. CATAN, ESQ.</p> <p>Address Line 1: MILES & STOCKBRIDGE, PC</p> <p>Address Line 2: 1751 PINNACLE DRIVE, SUITE 500</p> <p>Address Line 4: TYSONS CORNER, VIRGINIA 22102</p>											
ATTORNEY DOCKET NUMBER:	T4342-17802US01										
NAME OF SUBMITTER:	CHERYL GIBSON										

Signature:	/Cheryl Gibson/
Date:	10/17/2013
Total Attachments: 6 source=T4342-17802US02 Executed Assignment#page1.tif source=T4342-17802US02 Executed Assignment#page2.tif source=T4342-17802US02 Executed Assignment#page3.tif source=T4342-17802US02 Executed Assignment#page4.tif source=T4342-17802US02 Executed Assignment#page5.tif source=T4342-17802US02 Executed Assignment#page6.tif	

Assignment

WHEREAS, We Brugger, James M.; Alford, Steven C.; Schnell, William; Florence, Mark, have made an invention entitled SAFE NEEDLE METHODS, APPARATUS, AND SYSTEMS for which we have executed an application for Letters Patent of the United States on even date herewith or on _____, or filed an application for Letters Patent of the United States on May 26, 2011 under Application No. 13/116,597; and

WHEREAS, NxSTAGE MEDICAL, INC. ("ASSIGNEE"), a citizen of _____ or a corporation or other business entity organized under the laws of Massachusetts, and whose postal address is 439 South Union Street, Fifth Floor, Lawrence, MA 01843, desires to acquire the entire right, title, and interest in the United States in and to the invention, the application, and any Letters Patent of the United States to be granted for the invention;


NOW, THEREFORE, in consideration of One Dollar (\$1.00) paid to me/us by ASSIGNEE, and other good and valuable consideration, the receipt and sufficiency of which I/We acknowledge, I/We, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto ASSIGNEE, its successors, legal representatives, and assigns, the entire right, title, and interest in the United States in and to the invention, the application, all applications claiming benefit of the application, including, but not limited to, all divisions and continuations of the application, and all Letters Patent of the United States that may be granted thereon, and all reissues thereof; and I/We authorize and request the Director of the United States Patent and Trademark Office to issue all Letters Patent for the invention to ASSIGNEE, its successors, legal representatives, and assigns in accordance with the terms of this Assignment;

AND I/We covenant and agree that I/We have the full right to convey the entire right, title, and interest herein assigned and that I/We have not executed and will not execute any assignment or other instrument in conflict with this Assignment;

AND I/We further covenant and agree that upon request by ASSIGNEE, its successors, legal representatives, and/or assigns, and without further consideration, I/We will do all lawful acts that may be necessary or desirable to assist ASSIGNEE, its successors, legal representatives, and/or assigns to obtain and enforce patent protection for the invention in the United States of America, including, but not limited to, communicate with ASSIGNEE, its successors, legal representatives, and/or assigns any facts known to me/us regarding the invention, testify in any legal proceeding, sign all lawful papers, execute and deliver all papers that may be necessary or desirable to perfect the title to the invention in ASSIGNEE, its successors, legal representatives, and/or assigns, execute all divisional, continuation, and reissue applications, and make all rightful oaths, it being understood that any expense incident to the rendering of such assistance will be borne by ASSIGNEE, its successors, legal representatives, and/or assigns.

AND I/WE further hereby authorize ASSIGNEE or its attorneys or agents to insert the correct application number and filing date into this assignment, if none is indicated on that date of my/our execution of this Assignment.

IN WITNESS WHEREOF, I/We have executed this Assignment on the date(s)
indicated below.

Signature: 

Date: 15-Aug-2011

Full Name: Brugger, James M.

Address: 4 Savory Street

Newburyport, MA 01950

Signature: 

Date: 11-August-2011

Full Name: Alford, Steven, C.

Address: 5532 89th Pl., NE

Marysville, WA 98270

Signature: _____

Date: _____

Full Name: Schnell, William

Address: 1100 Crane Blvd.

Libertyville, IL 60048

Signature: _____

Date: _____

Full Name: Florence, Mark

Address: 21 Meadow Hill Road

Shrewsbury, MA 01545

Signature: _____

Date: _____

Full Name: _____

Address: _____

Signature: _____

Date: _____

Full Name: _____

Address: _____

Attorney Docket No. T4342-17802US01
United States

Assignment

WHEREAS, We Brugger, James M.; Alford, Steven C.; Schnell, William; Florence, Mark, have made an invention entitled SAFE NEEDLE METHODS, APPARATUS, AND SYSTEMS for which we have executed an application for Letters Patent of the United States on even date herewith or on _____, or filed an application for Letters Patent of the United States on May 26, 2011 under Application No. 13/116,597; and

WHEREAS, NxSTAGE MEDICAL, INC. ("ASSIGNEE"), a citizen of _____ or a corporation or other business entity organized under the laws of Massachusetts, and whose postal address is 439 South Union Street, Fifth Floor, Lawrence, MA 01843, desires to acquire the entire right, title, and interest in the United States in and to the invention, the application, and any Letters Patent of the United States to be granted for the invention;

NOW, THEREFORE, in consideration of One Dollar (\$1.00) paid to me/us by ASSIGNEE, and other good and valuable consideration, the receipt and sufficiency of which I/We acknowledge, I/We, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto ASSIGNEE, its successors, legal representatives, and assigns, the entire right, title, and interest in the United States in and to the invention, the application, all applications claiming benefit of the application, including, but not limited to, all divisions and continuations of the application, and all Letters Patent of the United States that may be granted thereon, and all reissues thereof; and I/We authorize and request the Director of the United States Patent and Trademark Office to issue all Letters Patent for the invention to ASSIGNEE, its successors, legal representatives, and assigns in accordance with the terms of this Assignment;

AND I/We covenant and agree that I/We have the full right to convey the entire right, title, and interest herein assigned and that I/We have not executed and will not execute any assignment or other instrument in conflict with this Assignment;

AND I/We further covenant and agree that upon request by ASSIGNEE, its successors, legal representatives, and/or assigns, and without further consideration, I/We will do all lawful acts that may be necessary or desirable to assist ASSIGNEE, its successors, legal representatives, and/or assigns to obtain and enforce patent protection for the invention in the United States of America, including, but not limited to, communicate with ASSIGNEE, its successors, legal representatives, and/or assigns any facts known to me/us regarding the invention, testify in any legal proceeding, sign all lawful papers, execute and deliver all papers that may be necessary or desirable to perfect the title to the invention in ASSIGNEE, its successors, legal representatives, and/or assigns, execute all divisional, continuation, and reissue applications, and make all rightful oaths, it being understood that any expense incident to the rendering of such assistance will be borne by ASSIGNEE, its successors, legal representatives, and/or assigns.

AND I/WE further hereby authorize ASSIGNEE or its attorneys or agents to insert the correct application number and filing date into this assignment, if none is indicated on that date of my/our execution of this Assignment.

WJS
8/11/11

Attorney Docket No. T4342-17802US01

IN WITNESS WHEREOF, I/We have executed this Assignment on the date(s)
indicated below.

Signature: _____

Date: _____

Full Name: Brugger, James M.

Address: 4 Savory Street

Newburyport, MA 01950

Signature: _____

Date: _____

Full Name: Alford, Steven, C.

Address: 5532 89th Pl., NE

Marysville, WA 98270

Signature: William J. SchnellDate: 8/11/2011

Full Name: Schnell, William

Address: 1100 Crane Blvd.

Libertyville, IL 60048

Signature: _____

Date: _____

Full Name: Florence, Mark

Address: 21 Meadow Hill Road

Shrewsbury, MA 01545

Signature: _____

Date: _____

Full Name: _____

Address: _____

Signature: _____

Date: _____

Full Name: _____

Address: _____

Assignment

WHEREAS, We Brugger, James M.; Alford, Steven C.; Schnell, William; Florence, Mark, have made an invention entitled SAFE NEEDLE METHODS, APPARATUS, AND SYSTEMS for which we have executed an application for Letters Patent of the United States on even date herewith or on _____, or filed an application for Letters Patent of the United States on May 26, 2011 under Application No. 13/116,597; and

WHEREAS, NxSTAGE MEDICAL, INC. ("ASSIGNEE"), a citizen of _____ or a corporation or other business entity organized under the laws of Massachusetts, and whose postal address is 439 South Union Street, Fifth Floor, Lawrence, MA 01843, desires to acquire the entire right, title, and interest in the United States in and to the invention, the application, and any Letters Patent of the United States to be granted for the invention;

NOW, THEREFORE, in consideration of One Dollar (\$1.00) paid to me/us by ASSIGNEE, and other good and valuable consideration, the receipt and sufficiency of which I/We acknowledge, I/We, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto ASSIGNEE, its successors, legal representatives, and assigns, the entire right, title, and interest in the United States in and to the invention, the application, all applications claiming benefit of the application, including, but not limited to, all divisions and continuations of the application, and all Letters Patent of the United States that may be granted thereon, and all reissues thereof; and I/We authorize and request the Director of the United States Patent and Trademark Office to issue all Letters Patent for the invention to ASSIGNEE, its successors, legal representatives, and assigns in accordance with the terms of this Assignment;

AND I/We covenant and agree that I/We have the full right to convey the entire right, title, and interest herein assigned and that I/We have not executed and will not execute any assignment or other instrument in conflict with this Assignment;

AND I/We further covenant and agree that upon request by ASSIGNEE, its successors, legal representatives, and/or assigns, and without further consideration, I/We will do all lawful acts that may be necessary or desirable to assist ASSIGNEE, its successors, legal representatives, and/or assigns to obtain and enforce patent protection for the invention in the United States of America, including, but not limited to, communicate with ASSIGNEE, its successors, legal representatives, and/or assigns any facts known to me/us regarding the invention, testify in any legal proceeding, sign all lawful papers, execute and deliver all papers that may be necessary or desirable to perfect the title to the invention in ASSIGNEE, its successors, legal representatives, and/or assigns, execute all divisional, continuation, and reissue applications, and make all rightful oaths, it being understood that any expense incident to the rendering of such assistance will be borne by ASSIGNEE, its successors, legal representatives, and/or assigns.

AND I/WE further hereby authorize ASSIGNEE or its attorneys or agents to insert the correct application number and filing date into this assignment, if none is indicated on that date of my/our execution of this Assignment.

IN WITNESS WHEREOF, I/We have executed this Assignment on the date(s)
indicated below.

Signature: _____

Date: _____

Full Name: Brugger, James M. _____

Address: 4 Savory Street _____

Newburyport, MA 01950 _____

Signature: _____

Date: _____

Full Name: Alford, Steven, C. _____

Address: 5532 89th Pl., NE _____

Marysville, WA 98270 _____


Signature: _____

Date: _____

Full Name: Schnell, William _____

Address: 1100 Crane Blvd. _____

Libertyville, IL 60048 _____

Signature:  _____

Date: 8-11-2011 _____

Full Name: Florence, Mark _____

Address: 21 Meadow Hill Road _____

Shrewsbury, MA 01545 _____

Signature: _____

Date: _____

Full Name: _____

Address: _____

Signature: _____

Date: _____

Full Name: _____

Address: _____