502551782 10/30/2013

PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
XAVIER FRANCI	11/03/2011
PHILIPPE DUMONT	11/04/2011
SVEIN-ERIK LINDGAARD	11/03/2011

RECEIVING PARTY DATA

Name:	GE HEALTHCARE LIMITED
Street Address:	AMERSHAM PLACE
City:	LITTLE CHALFONT, BUCKINGHAMSHIRE
State/Country:	UNITED KINGDOM
Postal Code:	HP7 9NA

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	13882392

CORRESPONDENCE DATA

Fax Number:

Phone: 6095146731

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Correspondence will be sent via US Mail when the email attempt is unsuccessful.

Correspondent Name: GE HEALTHCARE INC.
Address Line 1: 101 CARNEGIE CENTER

Address Line 2: IP DEPARTMENT

Address Line 4: PRINCETON, NEW JERSEY 08540

ATTORNEY DOCKET NUMBER: PZ1061 NAME OF SUBMITTER: CHRISTINE LEE Signature: //CHRISTINE LEE/		
	Signature:	/CHRISTINE LEE/
ATTORNEY DOCKET NUMBER: PZ1061	NAME OF SUBMITTER:	CHRISTINE LEE
	ATTORNEY DOCKET NUMBER:	PZ1061

PATENT 502551782 REEL: 031512 FRAME: 0180

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Date:	10/30/2013
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PATENT REEL: 031512 FRAME: 0181

ASSIGNMENT

For good and valuable consideration of which I/we acknowledge receipt, I/we:

XAVIER FRANCI of LONCIN, BELGIUM;
PHILIPPE DUMONT of LONCIN, BELGIUM;
SVEIN-ERIK LINDGAARD of OSLO, NORWAY;

hereby assign to **GE Healthcare Limited** having an address and a place of business at Amersham Place, Little Chalfont, Buckinghamshire, Great Britain HP7 9NA and its successors and assigns (collectively hereinafter called "the Assignee"), my/our entire right, title and interest throughout the world to the invention and improvements invented and originated by me/us as described in an application for patent filed on November 1, 2011, as International Application Number PCT/US2011/058742 which claims priority to United States application number 61/408,917, filed November 1, 2010, entitled PIERCE AND FILL DEVICE, and and any and all applications for patents and patents therefrom in any and all countries, including all divisions, continuations, reexaminations, reissues, continuations-in-part and extensions thereof, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and I/we authorize the Assignee to apply in all countries in my/our names or in its own name for patents and the like rights of exclusion and for inventor's certificates for said inventions and improvements. Assignor hereby authorizes and requests the Patent Offices to issue any and all Patent referred to above to the Assignee, as the Assignee of the entire right, title and interest in and to the same, for the Assignee's sole use and behoof and for the use and behoof of the Assignee's legal representatives, successors and assigns, to the full end of the term for which such Patent may be granted, as fully and entirely as the same would have been held by the Assignor had this assignment and sale not been made.

Page 1 of 4

INVENTOR 1 XAVIER FRANCI

Signature:

INVENTOR NAME

Date: 03 NoV 2011

Witnessed by

Signature

Date: _ 03 Nov 201

CAROLINE DEFRAITEUR

Printed Name of Witness

STANDRE / BELSIUM

City/Country of Residence of Witness

Witnessed by:

Date: 03 Nov lo 1

STEVE LIGNON

Printed Name of Witness

SOUMASNE / BELSIUM

City/Country of Residence of Witness

INVENTOR 2 PHILIPPE DUMONT

Signature:

NVENTOR NAME

Date: <u>04 Nov 20 11</u>

Witnessed by:

Signature

Date: 04 NOV 2011

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Herstal / BELGILIM

City/Country of Residence of Witness

Witnessed by:

Signature

Date: <u>04 NOV 204</u>

EMILIAND DE MARCO

Printed Name of Witness

ANS / BELGIUM

City/Country of Residence of Witness

INVENTOR 3 SVEIN-ERIK LINDGAARD

Signature Skn Film Signature Date: 3. Describer 211

Witnessed by: Ole John John Date: 3. Nov. 201/

OLE SOHS. TOKERUD
Printed Name of Witness

Langhus / Norway
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Witnessed by: <u>Cathrie Therapon</u> Date: <u>3 November 2011</u>
Signature

Signotare

CATHRINE THOMASSEN
Printed Name of Witness

Oslo / Norway
City/Country of Residence of Witness