# PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

#### **CONVEYING PARTY DATA**

Name	Execution Date
ROBERT LOCKWOOD	04/10/2014
ANDREW NACHENBERG	04/11/2014
DEREK ROBERTS	04/10/2014

### **RECEIVING PARTY DATA**

Name:	MEDLINE INDUSTRIES, INC.
Street Address:	ONE MEDLINE PLACE
City:	MUNDELEIN
State/Country:	ILLINOIS
Postal Code:	60060

### **PROPERTY NUMBERS Total: 1**

Property Type	Number
Application Number:	14254018

### CORRESPONDENCE DATA

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ATTORNEY DOCKET NUMBER:	9262-132163-US (10946U)
NAME OF SUBMITTER:	STEVEN G. PARMELEE
SIGNATURE:	/Steven G. Parmelee/
DATE SIGNED:	04/16/2014
	This document serves as an Oath/Declaration (37 CFR 1.63).

#### **Total Attachments: 5**

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PATENT REEL: 032683 FRAME: 0656

# COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION AND ASSIGNMENT THEREOF

As a below named inventor, I hereby declare that:

The below-identified application was made or authorized to be made by me.

I believe that I am the original inventor or an original joint inventor of a claimed invention in the application.

## METHOD AND APPARATUS FOR AN APPLICATOR

(Title of Invention)

the specification of which:

Ø

	(if applicable).
	as United States Application Number or PCT International Application Number, and was amended on
	was filed by an authorized person on my behalf on
$\boxtimes$	is attached hereto, or

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, including, for continuation-inpart applications, material information which became available between the filing date of the prior application and the filing date of the continuation-in-part application.

I, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign and sell, which confirms any previous assignment by me or by operation of law, to Medline Industries, Inc., an Illinois corporation, having its principal place of business at One Medline Place, Mundelein, Illinois 60060

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("Assignee"), its successors, assigns, and legal representatives, the entire right, title, and interest, in and to all subject matter and improvements invented, made, or conceived by me and described in the application for patent identified above and in and to all patent and all patent convention and treaty rights of all kinds, including the right to claim priority from said application, and all rights in and to any utility model, continuation, continuation-in-part, and divisional application therefrom, and any reissue or re-examination as to any patent issuing therefrom, in all countries throughout the world, for all such subject matter described therein, including all rights of action and rights to recover damages for past infringements.

I agree that on request and without further consideration, I will communicate to the Assignee or its representatives or nominees any facts known to me respecting the inventions and improvements and testify in any legal proceeding, make all rightful oaths, sign all lawful papers, and execute all instruments or documents required or requested for the making and prosecution of any applications of any type for patent, utility model, or other similar rights in all countries including, but not limited to, any provisional, non-provisional, continuation, continuation-in-part, divisional, renewal or substitute thereof, for any derivation proceedings relating thereto, and, as to any patents that issue from such applications, for any supplemental examination, derivation proceeding, opposition, post grant review, reissue, re-examination, inter partes review, or extension thereof, and generally do everything possible to aid the Assignee, its successors, assigns, and nominees to obtain and enforce proper patent protection for the invention and its improvements in all countries.

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made herein on information and belief are believed to be true.

I hereby acknowledge that any willful false statement made in this declaration is punishable under 18 U.S.C. § 1001 by fine or imprisonment of not more than five (5) years, or both.

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Legal Name of Inventor: (Given now spirs), as it is amily name last	Robert Lockwood
Inventor s Signature:	<u> </u>
Inventor's Address:	1124 Tracy Lane Libertyville, Illinois 60048 U.S.A.
Date:	the total
State of	) ) SS )
a Notary Public in and for said personally known by me (or proved the person whose name is subscribed that he executed the same in his aut	14, before me, Living Alford. State, personally appeared ROBERT LOCKWOOD, to me on the basis of satisfactory evidence) to be to the within instrument and acknowledged to me horized capacity, and that by his signature on the upon behalf of which the person acted, executed the
WITNESS my hand and official soal.	
Milley, alpu Notary Public	"OFFICIAL SEAL"  Lorene F Alper  Noticy Public, State of Illinois  My Commission Expires 3/29/2016
My Commission Expires: $\frac{3}{39}$	12016

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Legal Name of Inventor: (Given names first, with Family name last)	Andrew Nachenberg
Inventor's Signature:	City and the second
Inventor's Address:	646 Alleghany Rd. Grayslake, IL 60030 USA
Date:	11 - 2014
State of Illinois  County of Lake	) ) ss)
a Notary Public in and for said S personally known by me (or proved the person whose name is subscribed that he executed the same in his au	tate, personally appeared ANDREW NACHENBERG, It to me on the basis of satisfactory evidence) to be It to the within instrument and acknowledged to me thorized capacity, and that by his signature on the upon behalf of which the person acted, executed the
WITNESS my hand and official seal.	
Formy. agan_	
Notary Public  My Commission Expires:	"OFFICIAL SEAL" Lorene F Alper Notary I ubits State of Ill rolls N/ Commission Fig. 3 25 1216
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Attorney Docket 9262-132163-US

Legal Name of Inventor: (Given names first, with Family name last)	Derek Roberts
Inventor's Signature:	
Inventor's Address:	1350 N Wells St, Apt F-521 Chicago, Illinois 60610 USA
Date:	
State of	
On April 10, 2014, before me, Lorenc F. April a Notary Public in and for said State, personally appeared Derek Roberts, personally known by me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.	
WITNESS my hand and official seal.	
Notary Public  My Commission Expires: 3/29	#OFFICIAL SEAL"  Lorene F Alper  It largeful at Claim of the circle of Committee of the Experies 0.29/2016

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**RECORDED: 04/16/2014** 

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