

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT2877740

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
TALMA HENDLER	04/02/2012
RECEIVING PARTY DATA	
Name:	RAMOT AT TEL-AVIV UNIVERSITY LTD.
Street Address:	TEL AVIV UNIVERSITY CAMPUS
Internal Address:	THE SENATE BLDG, FL 1, P.O. BOX 39296
City:	TEL AVIV
State/Country:	ISRAEL
Postal Code:	61392
Name:	THE MEDICAL RESEARCH, INFRASTRUCTURE, AND HEALTH SERVICES FUND OF THE TEL AVIV MEDICAL CENTER
Street Address:	6 WEITZMANN STREET
City:	TEL AVIV
State/Country:	ISRAEL
Postal Code:	64239
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	13983419
CORRESPONDENCE DATA	
Fax Number:	(202)737-3528
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>	
Phone:	2026285197
Email:	ering@browdyneimark.com
Correspondent Name:	BROWDY AND NEIMARK, PLLC
Address Line 1:	1625 K STREET, N,W.
Address Line 2:	SUITE 1100
Address Line 4:	WASHINGTON, D.C. 20006
ATTORNEY DOCKET NUMBER:	HENDLER2 ASSIGN1
NAME OF SUBMITTER:	ERIN D. GERAGHTY
SIGNATURE:	/Erin D. Geraghty/

DATE SIGNED:	05/30/2014
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Total Attachments: 10

- source=2014-05-30assignment#page1.tif
- source=2014-05-30assignment#page2.tif
- source=2014-05-30assignment#page3.tif
- source=2014-05-30assignment#page4.tif
- source=2014-05-30assignment#page5.tif
- source=2014-05-30assignment#page6.tif
- source=2014-05-30assignment#page7.tif
- source=2014-05-30assignment#page8.tif
- source=2014-05-30assignment#page9.tif
- source=2014-05-30assignment#page10.tif

ASSIGNMENT

Full Name of Inventor: Talma Hendler
 Citizenship: Israeli
 Post Office Address: 17 Netzach Israel St
 Tel Aviv 64361
 Israel

For good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, the undersigned agree(s) to assign, and hereby do (does) assign, transfer and set over to

Name of Assignee Ramot at Tel-Aviv University Ltd.
 Israeli Company, of
Address of Assignee Tel Aviv University Campus
 The Senate Building, Floor-1
 P.O. Box 39296
 Tel Aviv 61392
 Israel

Name of Assignee The Medical Research, Infrastructure, and Health Services Fund of the Tel Aviv
 Medical Center
 Israeli Company, of
Address of Assignee 6 Weitzman Street
 Tel Aviv 64239 Israel

(hereinafter designated as the Assignee) the entire right, title and interest for the United States, its territories, dependencies and possessions and elsewhere throughout the world, in the invention, and all applications for patent and any Letters Patent which may be granted therefore, known as

Title METHOD AND SYSTEM FOR USE IN MONITORING NEURAL ACTIVITY IN A SUBJECT'S BRAIN

for which the undersigned has (have) executed an application for patent in the United States of America, the specification of which:

- is attached hereto.
 was filed on February 2, 2012 as Application Serial No. PCT/IL2012/050036

1) The undersigned agree(s) to execute all papers necessary in connection with the application and any continuing or divisional or reissue applications thereof and also to execute separate assignments in connection with such applications as the Assignee may deem necessary or expedient or essential to its full protection and title in and to the invention hereby transferred.

2) The undersigned agree(s) to execute all papers necessary in connection with any interference which may be declared concerning this application or continuation or division or re-issue thereof and to cooperate with the Assignee in every way possible in obtaining evidence and going forward with such interference.

3) The undersigned agree(s) to perform all affirmative acts which may be necessary to obtain a grant of a valid United States patent to the Assignee.

4) The undersigned agree(s) to communicate to the Assignee or representatives thereof any facts known to me (us) respecting the invention and improvements thereof, and will, upon request, but without expense to me (us), testify in any legal proceedings regarding the invention.

5) The undersigned hereby authorize(s) and request(s) the Commissioner of Patents to issue any and all Letters Patents of the United States resulting from said application or any division or divisions or continuing applications thereof to the said Assignee, as Assignee of the entire interest, and hereby covenants that he has (they have) full right to convey the entire interest herein assigned, and that he has (they have) not executed and will not execute, any agreement in conflict herewith.

6) The undersigned hereby grant(s) the firm of _____ the power to insert on this assignment any further identification which may be necessary or desirable in order to comply with the rules of the United States Patent Office for recordation of this document.

7) This Assignment shall be binding upon my (our) heirs, executors, administrators, and/or assigns, and shall inure to the benefit of the heirs, executors, administrators, successors and/or assigns of the Assignee.

In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Full Name of Inventor: Talma Hendler
Prof Talma Hendler M.D Ph.D
Inventor's Signature: _____
Head of Functional Brain Center
Wehl Institute for Advanced Imaging
Tel Aviv Sourasky Medical Center

Date: 02-04-2012

Date 2/4/12

Witness Hilit Tal

Date 2/4/12

Witness [Signature]

ASSIGNMENT

Full Name of Inventor: Nathan Intrator
Citizenship: Israeli
Post Office Address: 14/32 Eliyahu Hakim St.,
Tel Aviv 69120
Israel

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Name of Assignee Ramot at Tel-Aviv University Ltd.
Israeli Company, of
Address of Assignee Tel Aviv University Campus
The Senate Building, Floor-1
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Tel Aviv 61392
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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Full Name of Inventor: Nathan Intrator

Inventor's Signature: *Nathan Intrator* Date: May 10, 2012

Date _____ Witness _____
Date _____ Witness _____

ASSIGNMENT

Full Name of Inventor: Ilana KLOVATCH
 Citizenship: Israeli
 Post Office Address: 3/6 Isar Harel st.
 Petah Tikva 49222
 Israel

For good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, the undersigned agree(s) to assign, and hereby do (does) assign, transfer and set over to

Name of Assignee The Medical Research, Infrastructure, and Health Services Fund of the Tel Aviv Medical Center
 Israeli Company, of
Address of Assignee 6 Weitzman Street
 Tel Aviv 64239
 Israel

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6) The undersigned hereby grant(s) the firm of REINHOLD COHN AND PARTNERS the power to insert on this assignment any further identification which may be necessary or desirable in order to comply with the rules of the United States Patent Office for recordation of this document.

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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Full Name of Inventor: Iana KLOVATCH

Inventor's Signature:  Date: 22/7/2012

Date 27.7.12 Witness Michal ROH

Date _____ Witness _____

ASSIGNMENT

Full Name of Inventor: Sivan KINREIH
Citizenship: Israeli
Post Office Address: 12 Sapir St.,
Ramat Efal
Israel

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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Full Name of Inventor: Sivan KINREIH

Inventor's Signature: Sivan Kinreich Date: 26/7/12

Date 27.7.12 Witness Michael RY

Date _____ Witness _____

ASSIGNMENT

Full Name of Inventor: Yehudit MEIR-HASSON
Citizenship: Israeli
Post Office Address: 26 Yaacov St.,
Rehovot 76262
Israel

For good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, the undersigned agree(s) to assign, and hereby do (does) assign, transfer and set over to

Name of Assignee Ramot at Tel-Aviv University Ltd.
Israeli Company, of
Address of Assignee Tel Aviv University Campus
The Senate Building, Floor-1
P.O. Box 39296
Tel Aviv 61392
Israel

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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Full Name of Inventor: Yehudit MEIR-HASSON

Inventor's Signature: יְהוּדִית מֵיר-הַסּוֹן Date: 4/4/12

Date _____ Witness _____

Date _____ Witness _____