

PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
KEVIN M. FIEBIG	05/29/2014
J. SCOTT EHLERT	05/14/2014
RECEIVING PARTY DATA	
Name:	DEVICOR MEDICAL PRODUCTS, INC.
Street Address:	300 E-BUSINESS WAY
Internal Address:	5TH FLOOR
City:	CINCINNATI
State/Country:	OHIO
Postal Code:	45241
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14262906
CORRESPONDENCE DATA	
Fax Number:	(513)651-6981
<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>	
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Correspondent Name:	DEVICOR MEDICAL PRODUCTS, INC. C/O FROST
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Address Line 2:	301 EAST FOURTH STREET
Address Line 4:	CINCINNATI, OHIO 45202
ATTORNEY DOCKET NUMBER:	DEV7017USNP.0615648
NAME OF SUBMITTER:	LORETTA E. MOORE
SIGNATURE:	/Loretta E. Moore/
DATE SIGNED:	06/09/2014
Total Attachments: 4	
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PATENT	

ASSIGNMENT

The undersigned (hereinafter "Assignor") of the residence(s) indicated below are the inventor(s) of certain invention(s) and embodiment(s) thereof (hereinafter collectively the "Invention") described in a United States Patent Application Serial Number 14/262,906, filed on April 28, 2014 titled NEEDLE FIRING ASSEMBLY FOR BIOPSY DEVICE (hereinafter the "Application").

Devicor Medical Products, Inc., a corporation having a principal place of business at 300 E-Business Way, 5th Floor, Cincinnati, OH 45241, and its successors, assigns, and legal representatives (hereinafter "Assignee") desires to secure the entire right, title and interest in and to the Invention.

For good and valuable consideration, the receipt and adequacy of which is acknowledged, Assignor hereby:

1. Sells, assigns and transfers to Assignee the entire right, title and interest in and to the Invention, the Application, any other applications to which the Application claims priority benefit, including but not limited to related provisional applications, any other patent applications based in whole or in part upon the Invention or Application in any country (including Patent Cooperation Treaty, divisional, renewal, substitute, continuation, and continuation-in-part applications), all patents and other forms of intellectual property protection which may be granted thereon (including all reissues, reexaminations, and extensions thereof), and all priority rights appertaining thereto;

2. Sells, assigns and transfers to Assignee the entire right to claim the benefit of priority to the Application and to the following applications to which the Application claims priority benefit: U.S. Patent Application No. 61/820,305, filed 05/07/2013 titled: NEEDLE FIRING ASSEMBLY FOR BIOPSY DEVICE;

3. Authorizes Assignee to file applications for patents and other forms of intellectual property protection on the Invention in any country in the name of Assignee, or otherwise as Assignee may deem advisable;

4. Authorizes and requests the Director of the United States Patent & Trademark Office, and such patent office officials in foreign countries as are duly authorized by their laws to issue patents, to issue any patents on the Invention to Assignee as the owner of the entire right, title, and interest therein or otherwise as Assignee may direct;


5. Agrees, without expense to Assignor but without further consideration, to carry out in good faith the intent and purpose of this Assignment by executing all divisional, renewal, substitute, continuation, continuation-in-part, reissue, and all other patent applications based on the Invention; executing all rightful oaths, assignments, powers of attorney and other papers; communicating to Assignee all facts known to Assignor relating to the Invention and the history thereof; and generally, doing everything reasonably possible which Assignee shall consider desirable for aiding in securing, maintaining, and enforcing proper protection for the Invention

and for vesting title in Assignee to the Invention and all patent applications and patents based on the Invention;

6. Represents and warrants that Assignor has the full right to convey to Assignee the entire interest to the Invention, and that Assignor has not executed, and will not execute, any agreement in conflict herewith; and

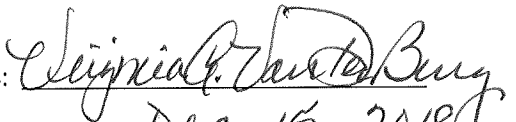
7. Authorizes Frost Brown Todd, LLC to insert in this Assignment the serial number and filing date of the Application or any other information which may be necessary or desirable in order to comply with the rules of the United States Patent and Trademark Office for recordation of this Assignment.

Sole or first inventor:

Signature:  Date: 5/29/2014
 Full Name: Kevin M. Fiebig
 Residence: 5747 Kroegermount Drive
Cincinnati, Ohio 45239

STATE OF Ohio)
) SS:
 COUNTY OF Hamilton)

On this 29th day of May, 2014, personally appeared before me Kevin M. Fiebig, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to on this Assignment, and acknowledged that he executed the same.

Notary Public: 
 My Commission Expires: Dec. 15, 2018



VIRGINIA A. VAN DEN BURG
 Notary Public, State of Ohio
 My Commission Expires
 December 15, 2018

Second inventor:

Signature: J. Scott Ehlert Date: 5/14/14
 Full Name: J. Scott Ehlert
 Residence: 8187 Hearthstone Court
Cincinnati, Ohio 45241

STATE OF Ohio)
) SS:
 COUNTY OF Hamilton)

On this 14 day of May, 2014, personally appeared before me J. Scott Ehlert, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to on this Assignment, and acknowledged that he executed the same.

Notary Public: Barbara J. Christy

My Commission Expires: _____
BARBARA J. CHRISTY
 Notary Public, State of Ohio
 My Commission Expires 02-28-2019

Assignee: DEVICOR MEDICAL PRODUCTS, INC.

By: [Signature]
Full Name: Gerry S. Gressel
Title: Associate General Counsel

Date: May 15, 2014

STATE OF Ohio)
COUNTY OF Hamilton) SS:

On this 15 day of May, 2014, personally appeared before me Gerry S. Gressel, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to on this Assignment, and acknowledged that he executed the same.

Notary Public: [Signature]

My Commission Expires: BARBARA J. CHRISTY
Notary Public, State of Ohio
My Commission Expires 02-28-2019