PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT2909097

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
ANTONIO E. PRATS	10/05/2012
LAWRENCE J. ST. GEORGE	10/05/2012
GREGORY S. KONSTORUM	10/02/2012
JOHN S. DURAN	10/04/2012

RECEIVING PARTY DATA

Name:	GYRUS ACMI, INC., D/B/A OLYMPUS SURGICAL TECHNOLOGIES AMERICA
Street Address:	136 TURNPIKE ROAD
City:	SOUTHBOROUGH
State/Country:	MASSACHUSETTS
Postal Code:	01772

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	14310066

CORRESPONDENCE DATA

Fax Number: (248)292-2910

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.

Phone: 248-292-2920
Email: wmorgan@patentco.com
Correspondent Name: KRISTEN L. PURSLEY
Address Line 1: 29 W. LAWRENCE STREET, SUITE 210
Address Line 4: PONTIAC, MICHIGAN 48342

ATTORNEY DOCKET NUMBER:	1663-003D1
NAME OF SUBMITTER:	KRISTEN L. PURSLEY
SIGNATURE:	/Kristen L. Pursley/
DATE SIGNED:	06/23/2014

Total Attachments: 4
source=Assignment#page1.tif
source=Assignment#page2.tif

source=Assignment#page3.tif
source=Assignment#page4.tif

COMBINED DECLARATION & ASSIGNMENT

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION: This declaration is for an original application.

INVENTORSHIP IDENTIFICATION: My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original inventor, or an original joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled: **EAR PRESSURE EQUALIZING TUBE AND INSERTION DEVICE**
SPECIFICATION IDENTIFICATION: X The attached application; or o The United States Application Number or PCT International Application Number filed on _____, 20_____, Serial Number _____/_____.
ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR: I hereby state that the filing of the above-referenced application was made or authorized to be made by me. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims. I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56.
DECLARATION: I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ASSIGNMENT OF INVENTION: In consideration of the payment by ASSIGNEE to ASSIGNORS of the sum of One Dollar ($1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

ASSIGNOR: hereby sell, assign and transfer to
Antonio E. Prats
38 Saturn Drive
Shrewsbury, MA 01776

Nationality: US

ASSIGNEE:
GYRUS ACMI, Inc.
d/b/a Olympus Surgical Technologies America
136 Turnpike Road
Southborough, MA 01772
State or Country of Formation: Delaware

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title and interest for the United States and any foreign countries, including all rights to claim priority, in and to any and all improvements which are disclosed in the above-referenced application including the right to claim priority in the United States or in any foreign countries, in and to, all Letters Patent to be obtained for said invention by the above-referenced application or any continuation, continuation-in-part, division, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof, including any and all rights to sue for past damages. ASSIGNORS hereby covenant that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment. ASSIGNORS further covenant that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent as may be known and accessible to ASSIGNORS and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said United States application, said invention and said Letters Patent which may be necessary or desirable to carry out the purposes thereof.

Inventor's Signature Antonio E. Prats

Date: 10/5/2012

Citizenship: US

Residence: Shrewsbury, MA 01545

Post Office Address: 38 Saturn Drive
Shrewsbury, MA 01545

Commonwealth Of Massachusetts
County of Middlesex

On this 5 day of October 2012, before me, Donna Dickson the undersigned notary public, personally appeared Antonio E. Prats, proved to me through satisfactory evidence of identification, which were known to me, to be the person whose name is signed on the preceding or attached document and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Notary Public's Signature

My Commission Expires 12/26/2014

COMBINED DECLARATION & ASSIGNMENT

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION: This declaration is for an original application.

INVENTORSHIP IDENTIFICATION: My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original inventor, or an original joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled: **EAR PRESSURE EQUALIZING TUBE AND INSERTION DEVICE**
SPECIFICATION IDENTIFICATION: X The attached application; or o The United States Application Number or PCT International Application Number filed on _____, 20_____, Serial Number _____/_____.
ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR: I hereby state that the filing of the above-referenced application was made or authorized to be made by me. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims. I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56.
DECLARATION: I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ASSIGNMENT OF INVENTION: In consideration of the payment by ASSIGNEE to ASSIGNORS of the sum of One Dollar ($1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

ASSIGNOR: hereby sell, assign and transfer to
Lawrence J. St. George
752 Concord Rd.
Sudbury, MA 01776

Nationality: US

ASSIGNEE:
GYRUS ACMI, Inc.
d/b/a Olympus Surgical Technologies America
136 Turnpike Road
Southborough, MA 01772
State or Country of Formation: Delaware

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title and interest for the United States and any foreign countries, including all rights to claim priority, in and to any and all improvements which are disclosed in the above-referenced application including the right to claim priority in the United States or in any foreign countries, in and to, all Letters Patent to be obtained for said invention by the above-referenced application or any continuation, continuation-in-part, division, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof, including any and all rights to sue for past damages. ASSIGNORS hereby covenant that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment. ASSIGNORS further covenant that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent as may be known and accessible to ASSIGNORS and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said United States application, said invention and said Letters Patent which may be necessary or desirable to carry out the purposes thereof.

Inventor's Signature Lawrence J. St. George

Date: 05-OCT-2012

Citizenship: US

Residence: Sudbury, MA 01776

Post Office Address: 752 Concord Rd.
Sudbury, MA 01776

Commonwealth Of Massachusetts
County of Middlesex

On this 5 day of October 2012, before me, Donna Dickson the undersigned notary public, personally appeared Lawrence J. St. George, proved to me through satisfactory evidence of identification, which were Known to me, to be the person whose name is signed on the preceding or attached document and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Donna Dickson
Notary Public's Signature

12/26/2014
My Commission Expires

Practitioner's Docket No.1663-003 *PATENT*

COMBINED DECLARATION & ASSIGNMENT

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION: This declaration is for an original application.

INVENTORSHIP IDENTIFICATION: My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original inventor, or an original joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled: **EAR PRESSURE EQUALIZING TUBE AND INSERTION DEVICE**

SPECIFICATION IDENTIFICATION: X The attached application; or ☐ The United States Application Number or PCT International Application Number filed on _____, 20____, Serial Number ____/_____.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR: I hereby state that the filing of the above-referenced application was made or authorized to be made by me. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims. I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56.

DECLARATION: I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ASSIGNMENT OF INVENTION: In consideration of the payment by ASSIGNEE to ASSIGNORS of the sum of One Dollar ($1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

ASSIGNOR: hereby sell, assign and transfer to
Gregory S. Konstorum
66-B Seaside Ave.
Stamford, CT 06902

Nationality: US

ASSIGNEE:
GYRUS ACMI, Inc.
d/b/a Olympus Surgical Technologies America
136 Turnpike Road
Southborough, MA 01772
State or Country of Formation: Delaware

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title and interest for the United States and any foreign countries, including all rights to claim priority, in and to any and all improvements which are disclosed in the above-referenced application including the right to claim priority in the United States or in any foreign countries, in and to, all Letters Patent to be obtained for said invention by the above-referenced application or any continuation, continuation-in-part, division, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof, including any and all rights to sue for past damages. ASSIGNORS hereby covenant that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment. ASSIGNORS further covenant that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent as may be known and accessible to ASSIGNORS and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said United States application, said invention and said Letters Patent which may be necessary or desirable to carry out the purposes thereof.

Inventor's Signature Gregory S. Konstorum

Residence: Stamford, CT 06902

Post Office Address: 66-B Seaside Ave. Stamford, CT 06902

Date: 2 Oct. 2012

Citizenship: US

SUBSCRIBING WITNESS AFFIDAVIT OF EXECUTION OF AN ASSIGNMENT

I, Irma Mendizabal

Whose full post office address is: 113-11 Rockaway St, Kew Gardens, NY, 11418, USA
Street, City, Postal Code, Country

Make oath and say that I was personally present and did see Gregory Konstorum who is personally known or identified to me to be the inventor named in the attached assignment, duly sign and execute the same for the purposes therein stated.

Signed at: OSTA - Stamford - CT

On this 2 day of October 2012

Subscribing Witness

COMBINED DECLARATION & ASSIGNMENT

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION: This declaration is for an original application.

INVENTORSHIP IDENTIFICATION: My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original inventor, or an original joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled: **EAR PRESSURE EQUALIZING TUBE AND INSERTION DEVICE**
SPECIFICATION IDENTIFICATION: X The attached application; or ☐ The United States Application Number or PCT International Application Number filed on _____, 20_____, Serial Number _____/_____.
ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR: I hereby state that the filing of the above-referenced application was made or authorized to be made by me. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims. I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56.
DECLARATION: I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ASSIGNMENT OF INVENTION: In consideration of the payment by ASSIGNEE to ASSIGNORS of the sum of One Dollar ($1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

ASSIGNOR:
John S. Duran
26 Lynn Ave.
Brewer, ME 04412

Nationality: US

hereby sell, assign and transfer to

ASSIGNEE:
GYRUS ACMI, Inc.
d/b/a Olympus Surgical Technologies America
136 Turnpike Road
Southborough, MA 01772
State or Country of Formation: Delaware

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title and interest for the United States and any foreign countries, including all rights to claim priority, in and to any and all improvements which are disclosed in the above-referenced application including the right to claim priority in the United States or in any foreign countries, in and to, all Letters Patent to be obtained for said invention by the above-referenced application or any continuation, continuation-in-part, division, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof, including any and all rights to sue for past damages. ASSIGNORS hereby covenant that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment. ASSIGNORS further covenant that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent as may be known and accessible to ASSIGNORS and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said United States application, said invention and said Letters Patent which may be necessary or desirable to carry out the purposes thereof.

Inventor's Signature John S. Duran

Date: 09 OCTOBER 2012

Citizenship: US

Residence: Brewer, ME 04412

Post Office Address: 26 Lynn Ave.
Brewer, ME 04412

SUBSCRIBING WITNESS AFFIDAVIT OF EXECUTION OF AN ASSIGNMENT

I, Nancy Hall

Whose full post office address is: 136 Turnpike Rd., Southborough, MA 01772
Street, City, Postal Code, Country

Make oath and say that I was personally present and did see John Duran who is personally known or identified to me to be the inventor named in the attached assignment, duly sign and execute the same for the purposes therein stated.

Signed at: 136 Turnpike Rd Southborough, MA 01772

On this 4th day of October 2012

Nancy Hall
Subscribing Witness