

<b>PATENT ASSIGNMENT COVER SHEET</b>
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Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT3493070

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT

**CONVEYING PARTY DATA**

Name	Execution Date
DAVID ANTHONY HOBBS	06/29/2015
SUSAN LORIS HILLIER	07/03/2015
REMO NUNZIO RUSSO	07/03/2015
ALEXANDER WILLIAM WALKER	07/29/2015
MAX BRISTOW HUGHES	07/28/2015
THOMAS SAMUEL WHITBY	06/28/2015

**RECEIVING PARTY DATA**

<b>Name:</b>	FLINDERS UNIVERSITY OF SOUTH AUSTRALIA
<b>Street Address:</b>	STURT ROAD
<b>Internal Address:</b>	SOUTH AUSTRALIA
<b>City:</b>	BEDFORD PARK
<b>State/Country:</b>	AUSTRALIA
<b>Postal Code:</b>	2042
<b>Name:</b>	UNIVERSITY OF SOUTH AUSTRALIA
<b>Street Address:</b>	RESEARCH SERVICES
<b>Internal Address:</b>	MAWSON LAKES CAMPUS, SOUTH AUSTRALIA
<b>City:</b>	MAWSON LAKES
<b>State/Country:</b>	AUSTRALIA
<b>Postal Code:</b>	5095
<b>Name:</b>	WOMEN'S AND CHILDREN'S HEALTH NETWORK INC.
<b>Street Address:</b>	72 KING WILLIAM ROAD
<b>Internal Address:</b>	SOUTH AUSTRALIA
<b>City:</b>	NORTH ADELAIDE
<b>State/Country:</b>	AUSTRALIA
<b>Postal Code:</b>	5006

**PROPERTY NUMBERS Total: 1**

Property Type	Number
<b>Application Number:</b>	14646535

**CORRESPONDENCE DATA****Fax Number:** (303)863-0223*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:** 303-863-9700**Email:** shouse@sheridanross.com**Correspondent Name:** SHERIDAN ROSS P.C.**Address Line 1:** 1560 BROADWAY**Address Line 2:** SUITE 1200**Address Line 4:** DENVER, COLORADO 80202

<b>ATTORNEY DOCKET NUMBER:</b>	5644USA-5
<b>NAME OF SUBMITTER:</b>	BRUCE A. KUGLER
<b>SIGNATURE:</b>	/Bruce A. Kugler/
<b>DATE SIGNED:</b>	08/21/2015

**Total Attachments: 7**

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Worldwide Assignment

WHEREAS, I/We **David Anthony HOBBS, Susan Loris HILLIER, Remo Nunzio RUSSO, Alexander William WALKER, Max Bristow HUGHES and Thomas Samuel WHITBY**, have made an invention entitled "**METHOD OF THERAPY AND HAPTIC GAMING SYSTEM FOR SENSORY AGNOSIA**" for which I/We have prepared an application for Letters Patent of the United States, or filed an application for Letters Patent of the United States on **May 21, 2015**, under Application No. **14/646,535**; and

WHEREAS, **FLINDERS UNIVERSITY OF SOUTH AUSTRALIA** ("ASSIGNEE"), a corporation or other business entity duly registered in the State/Country of **AUSTRALIA**, whose address is **Sturt Road, Bedford Park, S.A., 2042 AUSTRALIA**, desires to acquire the entire right, title, and interest in and to the invention, the application, and any Letters Patent to be granted for the invention in the United States and in all foreign countries;

WHEREAS, **UNIVERSITY OF SOUTH AUSTRALIA** ("ASSIGNEE"), a corporation or other business entity duly registered in the State/Country of **AUSTRALIA**, whose address is **Research Services, Mawson Lakes Campus, Mawson Lakes, S.A., 5095 AUSTRALIA**, desires to acquire the entire right, title, and interest in and to the invention, the application, and any Letters Patent to be granted for the invention in the United States and in all foreign countries;

WHEREAS, **WOMEN'S AND CHILDREN'S HEALTH NETWORK INC.** ("ASSIGNEE"), a corporation or other business entity duly registered in the State/Country of **AUSTRALIA**, whose address is **72 King William Road, North Adelaide, S.A., 5006 AUSTRALIA**, desires to acquire the entire right, title, and interest in and to the invention, the application, and any Letters Patent to be granted for the invention in the United States and in all foreign countries;

NOW, THEREFORE, in view of good and valuable consideration, paid to me/us by ASSIGNEE, the receipt and sufficiency of which I/We acknowledge, I/We, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto ASSIGNEE, its successors, legal representatives, and assigns, the entire right, title, and interest in and to the invention, the application, all applications claiming benefit of the application, including, but not limited to, all divisions and continuation of the application, and all Letters Patent that may be granted thereon in the United States, and in all foreign countries, and all reissues thereof, together with the right to claim priority under the International Convention in all member countries; and I/We authorize and request the Director of Patents and Trademarks to issue all Letters Patent for the invention to ASSIGNEE, its successors, legal representatives, and assigns in accordance with the terms of this Assignment;

AND I/We covenant and agree that I/We have the full right to convey the entire right, title, and interest herein assigned and that I/We have not executed and will not execute any assignment or other instrument in conflict with this Assignment;

AND I/We further covenant and agree that upon request by ASSIGNEE, its successors, legal representatives, and/or assigns, and without further consideration, I/We will do all lawful acts that may be necessary or desirable to assist ASSIGNEE, its successors, legal representatives, and/or assigns to obtain and enforce patent protection for the invention in the United States and in all foreign countries, including, but not limited to, communicate with ASSIGNEE, its successors, legal representatives, and/or assigns any facts known to me/us regarding the invention, testify in any legal proceeding, sign all lawful papers, execute and deliver all papers that may be necessary or desirable to perfect the title to the invention in ASSIGNEE, its successors, legal representatives, and/or assigns, execute all divisional, continuation, and reissue applications, and make all rightful oaths, it being understood that any expense incident to the rendering of such assistance will be borne by ASSIGNEE, its successors, legal representatives, and/or assigns;

AND I/We further hereby authorize ASSIGNEE, or its attorneys or agents, to insert the correct Application Number and filing Date into this Assignment, if none is indicated on that date of my/our execution of this agreement.

IN WITNESS WHEREOF, I/We have executed this Assignment on the date(s) indicated below.

Signature: *D. Hobbs*  
Date: 29 JUNE 2015  
Full Name: David Anthony HOBBS  
Address: 10 Wilpena Street  
Eden Hills, S.A., 5050  
AUSTRALIA

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Full Name: Susan Loris HILLIER  
Address: 83 Gilbert Street  
Adelaide, S.A., 5000  
AUSTRALIA

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Full Name: Remo Nunzio RUSSO  
Address: 35 Yeronga Avenue  
Kensington Park, S.A., 5068  
AUSTRALIA


Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Full Name: Alexander William WALKER  
Address: 21 Reedie Street  
Henley Beach, S.A., 5022  
AUSTRALIA

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Full Name: Max Bristow HUGHES  
Address: Unit 1, 24 Bridge Street  
Kensington, S.A., 5068  
AUSTRALIA

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Full Name: Thomas Samuel WHITBY  
Address: 7 Emerson Court  
Glenside, S.A., 5065  
AUSTRALIA

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Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Full Name: David Anthony HOBBS  
Address: 10 Wilpena Street  
Eden Hills, S.A., 5050  
AUSTRALIA

Signature:   
Date: 3/7/15  
Full Name: Susan Loris HILLIER  
Address: 83 Gilbert Street  
Adelaide, S.A., 5000  
AUSTRALIA

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Full Name: Remo Nunzio RUSSO  
Address: 35 Yeronga Avenue  
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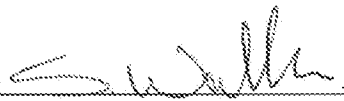
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Date: 29 - 07 - 2015  
Full Name: Alexander William WALKER  
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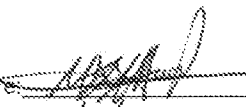
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Full Name: Alexander William WALKER  
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AUSTRALIA

Signature:  \_\_\_\_\_  
Date: 28/7/2015  
Full Name: Max Bristow HUGHES  
Address: Unit 1, 24 Bridge Street  
Kensington, S.A., 5068  
AUSTRALIA

Signature: \_\_\_\_\_  
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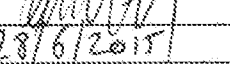
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