

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT3575028

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
STEVEN G. HALL	08/04/2015
RANDALL J. TANGUAY	08/20/2015
JEFFREY D. MESSERLY	08/04/2015
GALEN C. ROBERTSON	07/21/2015
ANDREW M. ZWOLINSKI	08/04/2015
FREDERICK E. SHELTON IV	08/03/2015
GEOFFREY C. HUEIL	08/04/2015
MARK S. ORTIZ	09/17/2015
DOUGLAS B. HOFFMAN	08/04/2015
PATRICK A. WEIZMAN	08/04/2015
DEAN B. BRUEWER	07/31/2015
GREGORY B. BLAIR	08/27/2015
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	ETHICON ENDO-SURGERY, INC.
<b>Street Address:</b>	4545 CREEK ROAD
<b>City:</b>	CINCINNATI
<b>State/Country:</b>	OHIO
<b>Postal Code:</b>	45242
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
<b>Application Number:</b>	14752127
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(412)355-6501
<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>	
<b>Phone:</b>	(412) 355-8675
<b>Email:</b>	piuspatents@klgates.com
<b>Correspondent Name:</b>	JOHN D. SCARITO
<b>Address Line 1:</b>	210 SIXTH AVENUE
<b>Address Line 2:</b>	K&L GATES CENTER

PATENT

**Address Line 4:** PITTSBURGH, PENNSYLVANIA 15222-2613

**ATTORNEY DOCKET NUMBER:** END6226USCNT4/070343CON4

**NAME OF SUBMITTER:** JOHN D. SCARITO

**SIGNATURE:** /John D. Scarito/

**DATE SIGNED:** 10/19/2015

This document serves as an Oath/Declaration (37 CFR 1.63).

**Total Attachments: 23**

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### COMBINED DECLARATION AND ASSIGNMENT

TITLE of Invention: SURGICAL STAPLING APPARATUS WITH CONTROL FEATURES OPERABLE WITH ONE HAND

As the below named inventor, I hereby declare that:

This declaration is directed to: ☐ The attached application, or  
☒ The United States application or PCT international application  
number 14/752,127 filed on June 26, 2015.

The above-identified application ("Application") was made or authorized by me.

I believe that I am the original inventor or an original inventor of a claimed invention or discovery in the Application.

I have reviewed and understood the contents of the Application, including the claims, and I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, the United States Code of Federal Regulations, §1.56 for filings of this Application in the United States of America.

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For good and valuable consideration, the sufficiency of which is acknowledged, I hereby sell, assign, transfer and set over to and/or have sold, assigned, transferred and set over to:

Ethicon Endo-Surgery, Inc.  
4545 Creek Road  
Cincinnati, Ohio 45242

A corporation of the state or country of Ohio

(hereinafter designated as the "Assignee"), my entire right, title, and interest in, to, and under the Application, including all priority rights for other countries arising therefrom, all inventions or discoveries therein disclosed, and any and all Letters Patent of the United States, European Patent Office and of all other countries, including Canada, which may be granted for such inventions or discoveries, or any of them, all such inventions or discoveries and all rights in such Application including any and all substitutions, divisions, and continuations thereof, and to all Letters Patent that may be granted for said inventions and discoveries, and in and to all extensions, supplementary protection certificates, reexaminations, renewals, and reissues thereof, to be held and enjoyed by Assignee for its own use and enjoyment to the full end of the term or terms for which such Letters Patent may be granted, as fully and entirely as the same would have been held and enjoyed by them had this assignment and sale not been made.

I agree to execute all papers necessary in connection with the Application in the United States, Patent Cooperation Treaty, European Patent Office and any other foreign countries and any continuing, divisional, or reissue applications thereof, any reexamination of any of such applications, and any patent term extensions or supplementary protection certificates of any such applications and also to execute separate assignments in connection with such applications as the Assignee may deem necessary or expedient.

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I hereby (i) authorize and request the Commissioner of Patents to issue any and all Letters Patent of the United States resulting from the Application or any divisional, continuation, or reissue applications thereof, and any reexamination of any of such applications, to the said Assignee, and (ii) as Assignee of the entire interest, and hereby covenant that I have full right to convey the interest herein assigned, and that I have not executed, and will not execute, any agreement in conflict herewith.

I hereby grant the attorney of record the power to insert on this assignment any further identification which may be necessary or desirable in order to obtain legal recordation of this document.

Steven G. Hall

LEGAL NAME OF INVENTOR

*Steven G. Hall*

Signature

8-4-2015

Date

ACKNOWLEDGMENT

STATE OF OHIO }  
COUNTY OF HAMILTON } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal

this 4<sup>th</sup> day of August, 2015.



KARA N. TULANKO  
Notary Public, State of Ohio  
My Commission Expires  
May 31, 2019

*Kara N. Tulanko*

Notary Public

Kara N. Tulanko  
Printed Name

My commission expires: May 31, 2019

Attorney Docket No.: END6226USCNT4/070343CON4  
US Application No.: 14/752,127

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Randall J. Tanguay  
LEGAL NAME OF INVENTOR

Randall J. Tanguay  
Signature

8/20/15  
Date

#### ACKNOWLEDGMENT

STATE OF OHIO }  
COUNTY OF HAMILTON } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal  
this 20<sup>th</sup> day of August, 2015.

[Signature]  
Notary Public

Christina L. Henry  
Printed Name

CHRISTINA L. HENRY  
Notary Public, State of Ohio  
My commission expires: My Commission Expires 08-15-2018



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4545 Creek Road  
Cincinnati, Ohio 45242

A corporation of the state or country of Ohio

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Jeffrey D. Messerly  
LEGAL NAME OF INVENTOR

Jeffrey D. Messerly  
Signature

8/4/2015  
Date

ACKNOWLEDGMENT

STATE OF OHIO }  
COUNTY OF HAMILTON } SS:

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KARA N. TULANKO  
Notary Public, State of Ohio  
My Commission Expires  
May 31, 2019

Kara N. Tulanko  
Notary Public

Kara N. Tulanko  
Printed Name

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Galen C. Robertson  
LEGAL NAME OF INVENTOR

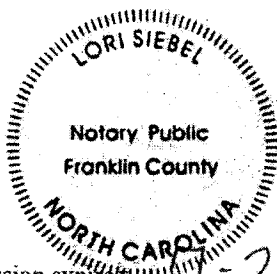
G C R  
Signature

7/21/15  
Date

ACKNOWLEDGMENT

STATE OF NC }  
COUNTY OF Franklin } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal  
this 21<sup>st</sup> day of July, 2015.



Lori Siebel  
Notary Public

Lori Siebel  
Printed Name

My commission expires: 7-20-18

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Andrew M. Zwolinski

LEGAL NAME OF INVENTOR

*Andrew M. Zwolinski*  
Signature

8/4/2015  
Date

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COUNTY OF HAMILTON } SS:

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Notary Public, State of Ohio  
My Commission Expires  
May 31, 2019

*Kara N. Tulanko*  
Notary Public

Kara N. Tulanko  
Printed Name

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Frederick E. Shelton, IV

LEGAL NAME OF INVENTOR

Signature

Date

8/3/15

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A corporation of the state or country of Ohio

(hereinafter designated as the "Assignee"), my entire right, title, and interest in, to, and under the Application, including all priority rights for other countries arising therefrom, all inventions or discoveries therein disclosed, and any and all Letters Patent of the United States, European Patent Office and of all other countries, including Canada, which may be granted for such inventions or discoveries, or any of them, all such inventions or discoveries and all rights in such Application including any and all substitutions, divisions, and continuations thereof, and to all Letters Patent that may be granted for said inventions and discoveries, and in and to all extensions, supplementary protection certificates, reexaminations, renewals, and reissues thereof, to be held and enjoyed by Assignee for its own use and enjoyment to the full end of the term or terms for which such Letters Patent may be granted, as fully and entirely as the same would have been held and enjoyed by them had this assignment and sale not been made.

I agree to execute all papers necessary in connection with the Application in the United States, Patent Cooperation Treaty, European Patent Office and any other foreign countries and any continuing, divisional, or reissue applications thereof, any reexamination of any of such applications, and any patent term extensions or supplementary protection certificates of any such applications and also to execute separate assignments in connection with such applications as the Assignee may deem necessary or expedient.

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I agree to do all other acts which, in the opinion of Assignee, may be necessary or desirable to secure the grant of Letters Patent to Assignee or its nominees, in the United States, European Patent Office and in all other countries where Assignee may desire to have such inventions or discoveries, or any of them, patented, with specifications and claims in such form as shall be approved by Assignee and to vest and confirm in Assignee or its nominees the full and complete legal and equitable title to all such Letters Patent.

I hereby (i) authorize and request the Commissioner of Patents to issue any and all Letters Patent of the United States resulting from the Application or any divisional, continuation, or reissue applications thereof, and any reexamination of any of such applications, to the said Assignee, and (ii) as Assignee of the entire interest, and hereby covenant that I have full right to convey the interest herein assigned, and that I have not executed, and will not execute, any agreement in conflict herewith.

I hereby grant the attorney of record the power to insert on this assignment any further identification which may be necessary or desirable in order to obtain legal recordation of this document.

Geoffrey C. Hueil  
LEGAL NAME OF INVENTOR

Signature

Date

ACKNOWLEDGMENT

STATE OF OHIO }  
COUNTY OF HAMILTON } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal  
this 4<sup>th</sup> day of August, 2015.



KARA N. TULANKO  
Notary Public, State of Ohio  
My Commission Expires  
May 31, 2019

Notary Public

Kara N. Tulanko  
Printed Name

My commission expires: May 31, 2019

## COMBINED DECLARATION AND ASSIGNMENT

TITLE of Invention: SURGICAL STAPLING APPARATUS WITH CONTROL FEATURES OPERABLE WITH ONE HAND

As the below named inventor, I hereby declare that:

This declaration is directed to: ☐ The attached application, or  
☒ The United States application or PCT international application  
number 14/752,127 filed on June 26, 2015.

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I believe that I am the original inventor or an original inventor of a claimed invention or discovery in the Application.

I have reviewed and understood the contents of the Application, including the claims, and I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, the United States Code of Federal Regulations, §1.56 for filings of this Application in the United States of America.

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 for filings of this Application in the United States of America.

For good and valuable consideration, the sufficiency of which is acknowledged, I hereby sell, assign, transfer and set over to and/or have sold, assigned, transferred and set over to:

Ethicon Endo-Surgery, Inc.  
4545 Creek Road  
Cincinnati, Ohio 45242

A corporation of the state or country of Ohio

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I hereby grant the attorney of record the power to insert on this assignment any further identification which may be necessary or desirable in order to obtain legal recordation of this document.

Mark S. Ortiz

LEGAL NAME OF INVENTOR

Signature

Date

*MSO 9/17/15*  
*MA 9/17/15*

ACKNOWLEDGMENT

STATE OF OHIO }  
COUNTY OF Hamilton } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal

this 17th day of September, 2015.



KIMBERLY MELLISSA MOSES  
Notary Public, State of Ohio  
My Commission Expires  
September 23, 2016

*Kimberly Mellissa Moses*  
Notary Public

Kimberly Mellissa Moses  
Printed Name

My commission expires: 09-23-2016

# COMBINED DECLARATION AND ASSIGNMENT

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4545 Creek Road  
Cincinnati, Ohio 45242

A corporation of the state or country of Ohio

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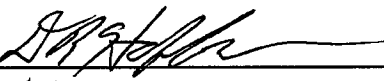
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Douglas B. Hoffman  
LEGAL NAME OF INVENTOR

  
Signature

8/4/15  
Date

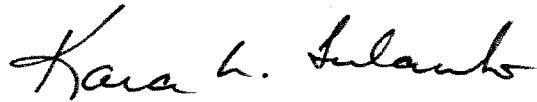
ACKNOWLEDGMENT

STATE OF OHIO }  
COUNTY OF HAMILTON } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal  
this 4th day of August, 2015.



**KARA N. TULANKO**  
Notary Public, State of Ohio  
My Commission Expires  
May 31, 2019

  
Notary Public

Kara N. Tulanko  
Printed Name

My commission expires: May 31, 2019

### COMBINED DECLARATION AND ASSIGNMENT

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4545 Creek Road  
Cincinnati, Ohio 45242

A corporation of the state or country of Ohio

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Patrick A. Weizman

LEGAL NAME OF INVENTOR

Patrick Weizman

Signature

8/4/15

Date

ACKNOWLEDGMENT

STATE OF OHIO }  
COUNTY OF HAMILTON } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal

this 4th day of August, 2015.



KARA N. TULANKO  
Notary Public, State of Ohio  
My Commission Expires  
May 31, 2019

Kara N. Tulanko

Notary Public

Kara N. Tulanko

Printed Name

My commission expires: May 31, 2019

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**Dean B. Bruewer**

**LEGAL NAME OF INVENTOR**

Dean B. Bruewer

Signature

7-31-15

Date

**ACKNOWLEDGMENT**

STATE OF OHIO }  
COUNTY OF HAMILTON } SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal

this 31<sup>ST</sup> day of July, 2015.



**KARA N. TULANKO**  
Notary Public, State of Ohio  
My Commission Expires  
May 31, 2019

Kara N. Tulanko

Notary Public

Kara N. Tulanko

Printed Name

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Gregory B. Blair

LEGAL NAME OF INVENTOR

[Signature]  
Signature

8/27/2015  
Date

ACKNOWLEDGMENT

STATE OF Minnesota  
COUNTY OF Ramsey SS:

Acknowledged before me, a Notary Public, within and for said County and State. Witness my hand and Notarial Seal  
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[Signature]  
Notary Public

DONNA LYNN GARCEAU  
Printed Name

My commission expires: January 31, 2018

