

PATENT ASSIGNMENT COVER SHEET

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|---|---|
| SUBMISSION TYPE: | NEW ASSIGNMENT |
| NATURE OF CONVEYANCE: | ASSIGNMENT |
| CONVEYING PARTY DATA | |
| Name | Execution Date |
| KIRSTEN VIERING | 11/30/2015 |
| RUSSELL DRESHER | 11/23/2015 |
| PAUL AQUILINO | 11/23/2015 |
| RYAN FOSS | 12/07/2015 |
| RECEIVING PARTY DATA | |
| Name: | BOSTON SCIENTIFIC SCIMED, INC. |
| Street Address: | ONE SCIMED PLACE |
| City: | MAPLE GROVE |
| State/Country: | MINNESOTA |
| Postal Code: | 55311 |
| PROPERTY NUMBERS Total: 1 | |
| Property Type | Number |
| Application Number: | 14978638 |
| CORRESPONDENCE DATA | |
| Fax Number: | |
| <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: | 202-808-3550 |
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| Correspondent Name: | BOOKOFF MCANDREWS, PLLC |
| Address Line 1: | 2401 PENNSYLVANIA AVENUE, NW, SUITE 450 |
| Address Line 4: | WASHINGTON, D.C. 20037 |
| ATTORNEY DOCKET NUMBER: | 06530-0706-01000 |
| NAME OF SUBMITTER: | AMANDA J. DITTMAR |
| SIGNATURE: | /Amanda J. Dittmar/ |
| DATE SIGNED: | 12/22/2015 |
| This document serves as an Oath/Declaration (37 CFR 1.63). | |
| Total Attachments: 4 | |
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COMBINED DECLARATION & ASSIGNMENT

Attorney Docket No.:
06530-0706-01000

Page 1 of 2

Client Ref. No.: 14-0763US01

Title: MEDICAL DEVICE ASSEMBLY AND
RELATED METHODS

ASSIGNMENT

WHEREAS, I, **Kirsten VIERING, Russell DRESHER, Paul AQUILINO** and **Ryan FOSS** have invented certain new and useful improvements as described in U.S. patent application, entitled **MEDICAL DEVICE ASSEMBLY AND RELATED METHODS**, the application being identified in the United States Patent and Trademark Office ("USPTO") by Application No. _____, filed _____ ("Invention"); and

WHEREAS, **Boston Scientific Scimed, Inc.**, a Corporation of the State of Minnesota, and having an address of One Scimed Place, Maple Grove, MN 55311-1566, U.S.A. (together with its successors and assigns, the "Assignee"), seeks to memorialize its ownership of the entire right, title and interest in and to the Invention;

NOW, THEREFORE, in exchange for good and valuable consideration, the receipt and adequacy of which are hereby acknowledged, I transfer to Assignee my entire right, title, and interest in and to the Invention, including all inventions disclosed or claimed in the above-identified patent application, including any improvements thereof, any corresponding domestic applications (e.g., provisional, non-provisional, divisional, continuation, continuation-in-part, reexamination, and/or reissue patent), any corresponding foreign applications, all patents issuing thereon, or other patent application based off or claiming priority to the above-identified patent application, and all rights and benefits under any applicable treaty or convention. I authorize the USPTO (or foreign equivalent thereof) to issue any patent (or similar legal protection) to the Assignee.

I authorize the Assignee to insert in this instrument the filing date and application number of the application when ascertained. I hereby authorize the Assignee (or its designee) to apply for patent (or similar legal protection) in its own name if desired, in any and all countries.

I represent to the Assignee that I have not and shall not execute any writing or do any act whatsoever conflicting with this Assignment. I agree when requested, without additional consideration, but at the expense of the Assignee, to provide additional reasonable assistance necessary to memorialize this assignment, to execute all oaths, declarations, assignments, powers of attorney and other papers necessary to perfect and vest title to the rights assigned herein to the Assignee; and will render all assistance in filing, obtaining, maintaining, and enforcing any patent (or similar legal protection) on the Invention in any and all countries.

DECLARATION

I have reviewed and understand the contents of the above-identified patent application including the claims, and I believe I am an original joint inventor of a claimed invention in the above-identified patent application. The above-identified patent application was made or authorized to be made by me. I am aware of and acknowledge my duty to disclose to the USPTO all information known to me to be material to patentability of the claims in the above-identified patent application. I 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.

COMBINED DECLARATION & ASSIGNMENT

Attorney Docket No.:
06530-0706-01000

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Client Ref. No.: 14-0763US01

Title: MEDICAL DEVICE ASSEMBLY AND
RELATED METHODS

Kirsten Viering
Kirsten VIERING
22 Union Street
Watertown, MA 02472

Date 11/30/2015

Russell Dresher
Russell DRESHER
8 Judith Road
Hudson, MA 01749

Date _____

Paul Aquilino
Paul AQUILINO
10 Wildwood Lane
Walpole, MA 02071

Date _____

Ryan Foss
Ryan FOSS
25 Northbrook Drive
Gray, ME 04039

Date _____

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Attorney Docket No.:
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Client Ref. No.: 14-0763US01

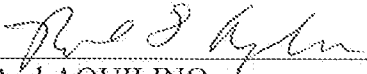
Title: MEDICAL DEVICE ASSEMBLY AND
RELATED METHODS

Kirsten VIERING
22 Union Street
Watertown, MA 02472

Date _____

Russell DRESHER
8 Judith Road
Hudson, MA 01749

Date Nov 23, 2015


Paul AQUILINO
10 Wildwood Lane
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25 Northbrook Drive
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