

PATENT ASSIGNMENT COVER SHEET

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EPAS ID: PAT3878632

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
SID E. O'BRYANT	01/16/2014
RECEIVING PARTY DATA	
Name:	UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER AT FORT WORTH
Street Address:	OFFICE OF RESEARCH DEVELOPMENT & COMMERCIALIZATION
Internal Address:	3500 CAMP BOWIE BLVD.
City:	FORT WORTH
State/Country:	TEXAS
Postal Code:	76109-2699
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	15037492
CORRESPONDENCE DATA	
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<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:	CYNTHIA MINCHILLO
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Address Line 4:	DALLAS, TEXAS 75254
ATTORNEY DOCKET NUMBER:	UNTF:1037US
NAME OF SUBMITTER:	CYNTHIA MINCHILLO
SIGNATURE:	/Cynthia Minchillo/
DATE SIGNED:	05/18/2016
Total Attachments: 1	
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ASSIGNMENT OF PATENT APPLICATION

FOR GOOD AND VALUABLE CONSIDERATION, the receipt, sufficiency and adequacy of which are hereby acknowledged, the undersigned, do hereby:

SELL, ASSIGN AND TRANSFER to **University of North Texas Health Science Center at Fort Worth** (the "Assignee"), having a place of business at **Technology Dev. & Commercialization, Office of Research & Biotechnology, 3500 Camp Bowie Blvd., Fort Worth, Texas 76109-2699**, the entire right, title and interest for the United States and all foreign countries in and to any and all inventions, subject matter and improvements disclosed in the application for **United States Letters Patent, Serial No. 61/908,812**, which has been filed on **11/26/2013** and is entitled "**Personalized Medicine Approach for Treating Cognitive Loss**," (the "Invention"), such application and any and all divisional, continuing, substitute, renewal, reissue and other applications for patent which have been or shall be filed in the United States and all foreign countries based on the Invention; all original, reissued and reexamined patents which have been or shall be issued in the United States and all foreign countries based on the Invention; and specifically including the right to file foreign applications under the provisions of any convention or treaty and claim priority based on such application in the United States;

AUTHORIZE AND REQUEST the issuing authority to issue any and all United States and foreign patents granted on such improvements to the Assignee;

WARRANT AND COVENANT that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been or will be made to others by the undersigned, and that the full right to convey the same as herein expressed is possessed by the undersigned:

COVENANT, when requested and at the expense of the Assignee, to carry out in good faith the intent and purpose of this assignment, the undersigned will execute all divisional, continuing, substitute, renewal, reissue, and all other patent applications on any and all such improvements; execute all rightful oaths, declarations, assignments, powers of attorney and other papers; communicate to the Assignee all facts known to the undersigned relating to such improvements and the history thereof; and generally do everything possible which the Assignee shall consider desirable for vesting title to such improvements in the Assignee, and for securing, maintaining and enforcing proper patent protection for such improvements;

TO BE BINDING on the heirs, assigns, representatives and successors of the undersigned and extend to the successors, assigns and nominees of the Assignee.

IN WITNESS WHEREOF, I have hereunto signed my name on the day and year set forth below.



Inventor's Signature

1/16/14

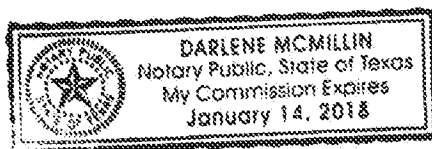
DATE

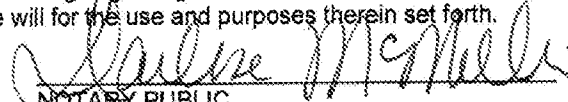
Sid E. O'Bryant

Inventor's Printed Name

STATE OF _____ }
COUNTY OF _____ } SS

On this 16th day of January, 2014, before me personally came the above named **Sid E. O'Bryant** who is personally known by me or proved to me on the basis of satisfactory evidence to be the same individual who executed the foregoing assignment, and who acknowledged to me that he/she executed the same of his/her own free will for the use and purposes therein set forth.





NOTARY PUBLIC
My Commission Expires: _____