

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
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EPAS ID: PAT3883210

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
CELINE M. VACHON	05/05/2016
RECEIVING PARTY DATA	
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Property Type	Number
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Total Attachments: 2	
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ASSIGNMENT

For valuable consideration, I, **CELINE M. VACHON** of 200 First Street SW, Rochester, Minnesota 55905; hereby sell, assign and transfer to **MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH**, a Minnesota charitable corporation, having a place of business at 200 First Street SW, Rochester, Minnesota 55905-0001, and its successors and assigns (collectively hereinafter "the Assignee"), the entire right, title, and interest throughout the world in the inventions and improvements that are subject of an application for United States Patent titled **AUTOMATED PERCENTAGE OF BREAST DENSITY MEASUREMENTS FOR FULL FIELD DIGITAL MAMMOGRAPHY** filed **November 24, 2015** and assigned U.S. Patent Application No. **14/893,603**, which is a filing under 35 USC §371 of PCT Serial Number PCT/US2014/040140 filed **May 30, 2014**, which claims priority to U.S. Patent Application No. **61/828,780** filed **May 30, 2013** and U.S. Patent Application No. **61/828,971** filed **May 30, 2013**; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and I authorize the Assignee to apply in all countries in my name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and I agree for myself and my respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

Date: 5/5/2016

Celine M. Vachon

Name: CELINE M. VACHON

WITNESSED BY:

[Signature]
Signature

Date: 5-5-2016

Debbi Strain
Type or Printed Name

Maya Clinic
Witness Address

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