## 504073894 10/31/2016

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 EPAS ID: PAT4120561 Stylesheet Version v1.2

SUBMISSION TYPE: NEW ASSIGNMENT

NATURE OF CONVEYANCE: ASSIGNMENT

### **CONVEYING PARTY DATA**

Name	Execution Date
ANNEMARIE SILVER	07/27/2011
FREDERICK J. GEHEB	07/27/2011
GARY L. HOCHSTETTLER	08/01/2011
VLADIMIR FLOROFF	07/20/2011
GARY A. FREEMAN	07/20/2011

#### **RECEIVING PARTY DATA**

Name:	ZOLL MEDICAL CORPORATION
Street Address:	269 MILL ROAD
City:	CHELMSFORD
State/Country:	MASSACHUSETTS
Postal Code:	01824-4105

#### **PROPERTY NUMBERS Total: 1**

Property Type	Number
Application Number:	15150725

#### CORRESPONDENCE DATA

**Fax Number:** (412)471-4094

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:** 412-471-8815

**Email:** assignments@webblaw.com

Correspondent Name: ANN M. CANNONI
Address Line 1: THE WEBB LAW FIRM

Address Line 2: 420 FT. DUQUESNE BLVD., SUITE 1200 Address Line 4: PITTSBURGH, PENNSYLVANIA 15222

ATTORNEY DOCKET NUMBER: 7460-1602020

NAME OF SUBMITTER: ANN M. CANNONI, REG. NO. 35,972

SIGNATURE: /Ann M. Cannoni/

DATE SIGNED: 10/31/2016

**Total Attachments: 7** 

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PATENT REEL: 040173 FRAME: 0982

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PATENT REEL: 040173 FRAME: 0983

RECORDATION FORM COVER SHEET			
PATENTS ONLY			
To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.			
1. Name of conveying party(ies) Annemarie Silver Gary A. Freeman Frederick J. Geheb Gary L. Hochstettler Vladimir Floroff	2. Name and address of receiving party(ies)  Name: Zoll Medical Corporation  Internal Address:		
Additional name(s) of conveying party(ies) attached? ☐ Yes ✓ No			
3. Nature of conveyance/Execution Date(s):  Execution Date(s) 7/20/2011, 7/27/2011 & 8/1/2011  Assignment Merger	Street Address: 269 Mill Road		
Security Agreement Change of Name	City: Chelmsford		
Joint Research Agreement	State: MA		
Government Interest Assignment Executive Order 9424, Confirmatory License	Country: US Zip: 01824-4105		
Other	Additional name(s) & address(es) attached? ☐ Yes ✓ No		
4. Application or patent number(s):	document serves as an Oath/Declaration (37 CFR 1.63).  B. Patent No.(s)  ached? Yes VNo		
5. Name and address to whom correspondence			
concerning document should be mailed:	6. Total number of applications and patents involved: 1		
Name: Ann M. Cannoni	7. Total fee (37 CFR 1.21(h) & 3.41) \$_0		
Internal Address: The Webb Law Firm	Authorized to be charged to deposit account		
Street Address: One Gateway Center	Enclosed		
420 Ft. Duquesne Blvd., Ste 1200	None required (government interest not affecting title)		
City: Pittsburgh	8. Payment Information		
State: PA Zip: 15222			
Phone Number: 412-471-8815	Danasit Assaurt Number 22 0650		
Docket Number: 7460 - 1602020	Deposit Account Number 23-0650		
Email Address: assignments@webblaw.com	Authorized User Name		
9. Signature:	October 31, 2016		
Signature	Date		
Ann M. Cannoni , Reg. No. 35,972  Name of Person Signing	Total number of pages including cover sheet, attachments, and documents:		
Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450			

PATENT

REEL: 040173 FRAME: 0984



# ASSIGNMENT

For valuable consideration, we, Annematic Silver, of 21 Railroad Avenue, Bedford, MA 01730; Frederick J. Geheb, of 18 Carolyn Drive, Danvers, MA 01923; Gary L. Hochstetler, of 343 Center Street, Groveland, MA 01834; Vladimir Floroff, of 359 Walker St., Lowell, MA 01851; Gary A. Freeman, of 47 Steams Street, Newton Center, MA 02159; hereby assign to ZOLL MEDICAL CORPORATION, a corporation of Massachusetts, having a place of business at 269 Mill Road, Chelmsford, MA 01824-4105, and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent signed by us, entitled WIRELESS VENTILATOR REPORTING, filed April 6, 2011, and assigned U.S. Serial Number 13/081.217, 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 we authorize the Assignee to apply in all countries in our 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 we agree for ourselves and our 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: <u>\$\\\ 27/1(</u>

Annemarie Silver

STATE OF

DUNTY OF THE P

SS.

of On the State of the Undersigned, a notary public for the State known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in her authorized capacity and that by her signature on this Assignment, the person or the entity upon behalf of which she acted, executed this Assignment.

WITNESS my hand and official seal.

Notary Public



DATE: 7/27/1/

FREDERICK LIGENER

STATE OF

COUNTY OF THE PARTY

WITNESS my hand and official seal.

Notary Public

ELAINE MARIE HYNES
Notary Public
Commonwealth of Massachusetts
My Commission Expires May 18, 2012

DATE: 8 1)

GARY L. HOCHSTETLER

STATE OF

COUNTY OF

SS.

of there personally appeared GARY L. HOCHSTETLER personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.

Notary Public

ELAINE MARIE HYNES
Notary Public
Commonwealth of Messachusetts
My Commission Expires May 18, 2012

DATE: 7-20-20//

VLADIMIR FLOROFF

STATE OF

COUNTY OF

\$\$.

COUNTY OF AMILE (LOSA)

WITNESS my hand and official seal.

Notary Public

ELAINE MARIE HYNES
Notary Public
Commonwealth of Massachusetts
My Commission Expires May 18, 2012

DATE: 7-20-11

GARY A. PREEMAN

STATE OF

COUNTY OF LOUIS

SS.

WITNESS my hand and official seal.

Notary Public

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ELAINE MARIE HYNES
Notary Public
Commonwealth of Massachusens
My Commission Expires May 18, 2012

Assignment Page 6 of 6

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