

PATENT ASSIGNMENT COVER SHEET

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EPAS ID: PAT4218677

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
JOHN NEPOMUCENO	12/14/2016
RECEIVING PARTY DATA	
Name:	STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY
Street Address:	ONE STATE FARM PLAZA
Internal Address:	A-3
City:	BLOOMINGTON
State/Country:	ILLINOIS
Postal Code:	61710
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14676491
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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ATTORNEY DOCKET NUMBER:	16091.105056
NAME OF SUBMITTER:	TODD ROSSON
SIGNATURE:	/TAR/
DATE SIGNED:	01/10/2017
Total Attachments: 1	
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ASSIGNMENT

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I, the below signed inventor of record, hereby assign to:

STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY
ONE STATE FARM PLAZA, A-3
BLOOMINGTON, IL 61710-0001

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 the subject of an application for United States Patent signed by me this day, entitled:

"Online Method For Training Vehicle Drivers And Determining Hazard Detection Proficiency"

this assignment including said application, any and all United States and foreign patents, utility models, design registrations, inventor's certificates and other similar rights 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 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.

IN WITNESS THEREOF, I hereby set my hand, date of signature and place of signature as indicated below.

Full Name of Joint Inventor:	John Nepomuceno
Residence:	3304 Stonebridge Drive Bloomington, Illinois 61704
Citizenship:	United States
Post Office Address:	3304 Stonebridge Drive Bloomington, Illinois 61704



 Signature of Inventor

12/14/2016

 Date of Signature

In the State of Illinois §
 In the County of McLean §

Before me, the undersigned authority, on this 14 day of December, 2016 personally appeared **John Nepomuceno**, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same of his own free will for the purposes and consideration therein expressed.

OFFICIAL SEAL
NATHAN VERMILLION
 NOTARY PUBLIC - STATE OF ILLINOIS
 My Commission Expires April 17, 2019



 Notary or Consular Officer