PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
MICHAEL X. GOVEA	01/30/2017
WILLIAM GEORGE ORINSKI	01/31/2017
WILLIAM CONRAD STOFFREGEN	01/31/2017

RECEIVING PARTY DATA

Name:	BOSTON SCIENTIFIC NEUROMODULATION CORPORATION
Street Address:	25155 RYE CANYON LOOP
City:	VALENCIA
State/Country:	CALIFORNIA
Postal Code:	91355

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	15436544

CORRESPONDENCE DATA

Fax Number:

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: 206-381-3300

Email: patentdocketing@lowegrahamjones.com

Correspondent Name: BRUCE E. BLACK/LOWE GRAHAM JONES PLLC

Address Line 1: 701 FIFTH AVENUE

Address Line 2: SUITE 4800

Address Line 4: SEATTLE, WASHINGTON 98104

ATTORNEY DOCKET NUMBER:	BSNC-1-617.1	
NAME OF SUBMITTER: TIFFANY D. KELLY		
SIGNATURE:	/Tiffany D. Kelly/	
DATE SIGNED:	02/17/2017	
This document serves as an Oath/Declaration (37 CFR 1.63).		

Total Attachments: 6

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Attorney Docket No.: BSNC-1-617.1

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Client Ref. No.: 15-0665US01

Title: ELECTRICAL STIMULATION CUFF

DEVICES AND SYSTEMS

ASSIGNMENT

WHEREAS, Michael X. G	ovea, William George Orinski and William Conrad
Stoffregen have invented certain n	ew and useful improvements as described in the specification
bearing the above Attorney Docket	No. and title, executed by me concurrently herewith, and/or
being identified in the United State	s Patent and Trademark Office ("USPTO") by Application
No. , filed	("Invention").
ino, med	

WHEREAS, **BOSTON SCIENTIFIC NEUROMODULATION CORPORATION**, a Corporation of the State of Delaware, and having an address of 25155 Rye Canyon Loop, Valencia, California 91355 (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.

Attorney Docket No.: BSNC-1-617.1

Page 2 of 2

Client Ref. No.: 15-0665US01

Title: ELECTRICAL STIMULATION CUFF

DEVICES AND SYSTEMS

DECLARATION

I have reviewed and understand the contents of the above-identified patent application including the claims, and I believe I am an original or 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.

Dated: 30 TAIN 2017	Michael X. Govea, Inventor
Dated:	William George Orinski, Inventor
Dated:	William Conrad Stoffregen, Inventor

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Dated:	Michael X. Govea, Inventor
Dated: 0//31/2017	William George Orinski, Inventor
Dated:	William Conrad Stoffregen, Inventor

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Dated:	Michael X. Govea, Inventor
Dated:	William George Orinski, Inventor
Dated: 3) January 2017	William Conrad Stoffregen, Inventor