504271320 03/14/2017

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4318002

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
GARY A. FREEMAN	11/29/2016
MICHAEL BUONADONNA	03/09/2017
GUY R. JOHNSON	12/01/2016
JUSTIN R. CARROLL	12/16/2016
ANNEMARIE SILVER	12/05/2016
FREDERICK J. GEHEB	11/30/2016
JOHN C. AMANN	12/19/2016

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:	15230591

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: THE WEBB LAW FIRM

Address Line 1: 420 FT. DUQUESNE BLVD., SUITE 1200

Address Line 2: ONE GATEWAY CENTER

Address Line 4: PITTSBURGH, PENNSYLVANIA 15222

ATTORNEY DOCKET NUMBER:	7460-155507	
NAME OF SUBMITTER:	ANN M. CANNONI, REG. NO. 35,972	
SIGNATURE:	/Ann M. Cannoni/	
DATE SIGNED:	03/14/2017	

504271320 PATENT REEL: 041571 FRAME: 0869

Total Attachments: 14	
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PATENT REEL: 041571 FRAME: 0870

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) Gary A. Freeman Annemarie Silver Michael Buonadonna Frederick J. Geheb Guy R. Johnson John Amann Justin R. Carroll Additional name(s) of conveying party(ies) attached? Yes V No 3. Nature of conveyance/Execution Date(s): Execution Date(s) 11/29; 11/30; 12/1; 12/5; 12/16 & 12/19/2016 3/9/2017 Assignment Merger Security Agreement Change of Name Joint Research Agreement	2. Name and address of receiving party(ies) Name: ZOLL MEDICAL CORPORATION Internal Address: 269 Mill Road	
Government Interest Assignment Executive Order 9424, Confirmatory License Other	Country: US Zip: 01824-4105 Additional name(s) & address(es) attached? Yes V No	
4. Application or patent number(s): This A. Patent Application No.(s) 15/230,591 Additional numbers at	document serves as an Oath/Declaration (37 CFR 1.63). B. Patent No.(s)	
5. Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved: 1	
Name: Ann M. Cannon, Reg. No. 35,972 Internal Address: The Webb Law Firm	7. Total fee (37 CFR 1.21(h) & 3.41) \$0	
Street Address: One Gateway Center 420 Ft. Duquesne Blvd., Ste 1200	Enclosed None required (government interest not affecting title)	
City: Pittsburgh State: PA Zip: 15222	8. Payment Information	
Phone Number: 412-471-8815 Docket Number: 7460 - 155507 Email Address: assignments@webblaw.com	Deposit Account Number 23-0650 Authorized User Name	
9. Signature: Signature Ann M. Cannon, Reg. No. 35,972 Name of Person Signing Documents to be recorded (including cover shee	March 14, 2017 Date Total number of pages including cover sheet, attachments, and documents: 14	

PATENT

REEL: 041571 FRAME: 0871

	DOMESTIC
Application No.	15/230,591
Attorney Docket No.	7460-155507

ASSIGNMENT

White the state of
WHEREAS, as a below named inventor, I have invented certain new and useful improvements in
WRIST-WORN DEVICE FOR COORDINATING PATIENT CARE
(Invention Title)
(invention time)
for which a United States Provisional Patent application was filed on(mm/dd/yyyy) and bears Application Number (hereinafter "said application").
AND/OR
for which I have this day executed an application for a United States Patent (hereinafter "said application"). AND/OR
purament,
X for which an application for a United States Patent was filed on 08/08/2016 (mm/dd/yyyy) and bears Application Number 15/230,591 (hereinafter "said application"). AND/OR
for which an international patent application was filed under the Patent Cooperation Treaty on (mm/dd/yyyy), bearing Application No. (hereinafter "said application").
AND, WHEREAS, ZOLL MEDICAL CORPORATION, a corporation of Massachusetts, having a place of business at 269 Mill Road, Chelmsford, MA 01824-4105, hereinafter called the "assignee", is desirous of acquiring the entire right, title, and interest in and to said application and the inventions and improvements therein disclosed.
NOW, THEREFORE, for good and valuable consideration paid to me by said assignee, the receipt of which is hereby acknowledged, I as the inventor or as one of the inventors, hereinafter the assignor(s), do hereby assign, sell and transfer unto said assignee the full and exclusive right, title and interest in and to said application and the inventions and improvements therein disclosed for the United States and all foreign countries and any Letters Patent which may issue therefor in the United States and all foreign countries and all divisions, reissues, continuations, continuations-in-part, renewals and/or extensions thereof. Such assignment extends to the full ends of the terms of these applications and patents as fully and entirely as the same would have been held and enjoyed by me had this Assignment not been made.
I covenant that I am the lawful owner(s) of said application, inventions and improvements, that the same are unencumbered, that no license has been granted to make, use or vend the said inventions or improvements or any of them, and that I have the full right to make this Assignment.

And for the consideration aforesaid, I agree individually and, if applicable, jointly that I will communicate to said assignee or the representatives thereof any facts known to me respecting said inventions and improvements, and will, upon request but without expense to me, testify in any legal proceedings, sign all lawful papers, execute all divisional, reissue, continuation, continuation-in-part, renewal and/or extension applications, make all rightful oaths, and generally do all other and further lawful acts deemed necessary or expedient by said assignee or by counsel for said assignee to assist or enable said assignee to obtain and enforce full benefits from the rights and interests herein assigned. This Assignment shall be binding upon my heirs, executors, administrators and/or assigns, and shall inure to the benefit of the heirs, executors, administrators, successors and/or assigns, as the case may be, of said assignee.

1. FULL NAME OF ASSIGNOR:	RESIDENCE:
Gary A. Freeman	Waltham, MA
EXECUTED this 29th day of November.	May X
STATE of massachusetts COUNTY of Middleset	SIGNATURE
COUNTY of Middle)	
On this 29th day of Neventer, in the year	2016, before me Helen D. Lenry,
a notary public, personally appeared	Gary A. Freeman ,
proved on the basis of satisfactory evidence to be the and acknowledged he/she executed the same.	NAME OF DOCUMENT SIGNER ne person whose name is subscribed to this instrument,
I certify under Penalty of Perjury under the laws of that the foregoing paragraph is true and correct.	
	Witness my hand and official seal.
	NOTARY PUBLIC
	S E
	HELEN D. LEARY Notary Public Massachusetts Commission Expires Jul 11, 2019

Checked Box indicates 3 additional page(s) for inventor signatures.

	DOMESTIC
Application No.	15/230,591
Attorney Docket No.	7460-155507

2. FULL NAME OF ASSIGNOR: Michael Buonadonna	RESIDENCE: Arlington, MA
EXECUTED thisday of, 2	016
STATE of) COUNTY of)	Signature
	2016, before me YEAR NOTARY PUBLIC NAME Michael Buonadonna NAME OF DOCUMENT SIGNER e person whose name is subscribed to this instrument,
and acknowledged he/she executed the same.	•
I certify under Penalty of Perjury under the laws of that the foregoing paragraph is true and correct.	Witness my hand and official seal.
	NOTARY PUBLIC S E A L
3. FULL NAME OF ASSIGNOR: Guy R. Johnson EXECUTED this /st day of December, 2	RESIDENCE: Magnolia, MA 016
STATE OF Massachusetts)	SIGNATURE
COUNTY of middlesuf	./
On this 15t day of Jacobbe, in the year a notary public, personally appeared	Guy R. Johnson
and acknowledged he/she executed the same.	NAME OF DOCUMENT SIGNER e person whose name is subscribed to this instrument,
I certify under Penalty of Perjury under the laws of that the foregoing paragraph is true and correct.	Witness my hand and official seal.
	NOTARY PUBLIC HELEN D. LEARY Notary Public Massachuselts Commission Expires Jul 11, 2019

DOMESTIC Application No. 15/230,591

Attorney Docket No. 7460-155507

4. FULL NAME OF ASSIGNOR: Justin R. Carroll	RESIDE	ENCE: Shirley, MA
EXECUTED thisday of	, 2016	d. False
		SIGNATURE
STATE of		
COUNTY of)		
On this day of, in the	e year _2016	, before me, NOTARY PUBLIC NAME
a notary public, personally appeared	YEAR	NOTARY PUBLIC NAME Justin R. Carroll NAME OF DOCUMENT SIGNER
proved on the basis of satisfactory evidence to and acknowledged he/she executed the same		
I certify under Penalty of Perjury under the l		e of
that the foregoing paragraph is true and corre	ect.	Witness my hand and official seal.
		NOTARY PUBLIC
		S E
•		A L
5. FULL NAME OF ASSIGNOR:	RESIDI	ENCE; Bedford, MA
Annemarie Silver	***************************************	Bedford, WA
EXECUTED this 5 H day of December	<u>lv</u> , 2016	
STATE of massachusetts		Signature
COUNTY of Misslesel		£
	e vear 2016	, before me Helen D. Learn
On this 5 th day of Seconder, in the	YEAR	NOTARY PUBLIC NAME
a notary public, personally appeared		Annemarie Silver ,
proved on the basis of satisfactory evidence to and acknowledged he/she executed the same		
I certify under Penalty of Perjury under the I that the foregoing paragraph is true and corn		e of Frassachusetts
		Witness my hand and official seal
		Leen D. Lean
		NOTARY PUBLIC
•		S E
		A L
en de la companya de La companya de la co	D 4 - 65	HELEN D. LEARY Notary Public Massachusetts
	Page 4 of 5	Commission Expires Jul 11, 2019

	Appl	ication No	15/230,59
	Attorne	ey Docket No	7460-15550
6. FULL NAME OF ASSIGNOR: Frederick J. Geheb	RESIDENCE: Danyers,	MA	
EXECUTED this 30th day of Wovember, 2	016 Abella	A. Hall	
STATE of Massachuntt)	New Comments	✓ SIGNATURE	
COUNTY of Middlevel			
On this 30th day of hovereded, in the year	2016 , before me	Helen J. Lea NOTARY PUBLIC	NAME,
a notary public, personally appeared	Frederick J. G	eheb	
proved on the basis of satisfactory evidence to be the and acknowledged he/she executed the same.	e person whose name is	subscribed to th	
I certify under Penalty of Perjury under the laws of that the foregoing paragraph is true and correct.			
	Lu	ess my hand and	edu
	1	NOTARY PUBLIC	S
		HELEN D. LEA Notary Public	A L
7. FULL NAME OF ASSIGNOR: John C. Amann	RESIDENCE	Massachusett Coronicsion Expires Ju	
EXECUTED this 19th day of December?		1 01	7
) JU	SIGNATURE	
STATE of massachustly			
COUNTY of Middlesel On this 19th day of Secundary in the year	2016, before me	Helen S.	Leaky.
a notary public, personally appeared	YEAR John C. Am	NOTARY PUBLIC ann	NAME T
proved on the basis of satisfactory evidence to be the and acknowledged he/she executed the same.	NAME OF DOCUMEN ne person whose name is		is instrument,
I certify under Penalty of Perjury under the laws of that the foregoing paragraph is true and correct.	f the State of Type	ssachu	'setts
	Witn	ess my hand any	tofficial seal.
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		HELEN D. LEARY Notary Public Massachusetts mmission Expires Jul 1	A L

Page 5 of 5

Application No	DOMESTIC 15/230,591
Attorney Docket No.	7460-155507

ASSIGNMENT

ADDIGAMENT
WHEREAS, as a below named inventor, I have invented certain new and useful
improvements in
WRIST-WORN DEVICE FOR COORDINATING PATIENT CARE
(Invention Title)
for which a United States Provisional Patent application was filed on (mm/dd/yyyy) and bears Application Number (hereinafter "said application"). AND/OR
for which I have this day executed an application for a United States Patent (hereinafter "said application"). AND/OR
X for which an application for a United States Patent was filed on 08/08/2016 (mm/dd/yyyy) and bears Application Number 15/230,591 (hereinafter "said application").
AND/OR
for which an international patent application was filed under the Patent Cooperation Treaty on(mm/dd/yyyy), bearing Application No (hereinafter "said application").
AND, WHEREAS, ZOLL MEDICAL CORPORATION, a corporation of Massachusetts, having a place of business at 269 Mill Road, Chelmsford, MA 01824-4105, hereinafter called the "assignee", is desirous of acquiring the entire right, title, and interest in and to said application and the inventions and improvements therein disclosed.
NOW, THEREFORE, for good and valuable consideration paid to me by said assignee, the receipt of which is hereby acknowledged, I as the inventor or as one of the inventors, hereinafter the assignor(s), do hereby assign, sell and transfer unto said assignee the full and exclusive right, title and interest in and to said application and the inventions and improvements therein disclosed for the United States and all foreign countries and any Letters Patent which may issue therefor in the United States and all foreign countries and all divisions, reissues, continuations, continuations-in-part, renewals and/or extensions thereof. Such assignment extends to the full ends of the terms of these applications and patents as fully and entirely as the same would have been held and enjoyed by me had this Assignment not been made.
I covenant that I am the lawful owner(s) of said application, inventions and improvements, that the same are unencumbered, that no license has been granted to make, use or vend the said inventions or improvements or any of them, and that I have the full right to make this Assignment

	DOMESTIC
	Application No15/230,591 Attorney Docket No7460-155507
	7 1107 100 100 100 100 100 100 100 100 1
4. FULL NAME OF ASSIGNOR:	RESIDENCE:
Justin R. Carroll	Shirley, MA
EXECUTED this 16th day of December	,2016 Sunta Cell
STATE OF Colorado	Signature
COUNTY of Broomheld	
On this 16th day of Pecer her, in the y	ear 2016, before me Hygela Lee Rossbell YEAR
a notary public, personally appeared	Justin R. Carroll NAME OF DOCUMENT SIGNER
proved on the basis of satisfactory evidence to be and acknowledged he/she executed the same.	e the person whose name is subscribed to this instrument,
I certify under Penalty of Perjury under the law	s of the State of Calorado
that the foregoing paragraph is true and correct	
est subsequent	Witness my hand and official seal.
ANGELA LEE ROSSE	ACK Angela Lee Kossback
ANGELA LEE ROSSE NOTARY PUBLIC STATE OF COLORAD	
NOTARY ID 200240241 W MY COMMISSION EXPIRES JULY	29 8 8 B
***************	A I
***************************************	***************************************
5. FULL NAME OF ASSIGNOR:	RESIDENCE:
Annemarie Silver	Bedford, MA
EXECUTED thisday of	, 2016
STATE of	SIGNATURE
COUNTY of	
On this day of, in the ye	ear 2016, before me
a notary public, personally appeared	Annemarie Silver
	NAME OF DOCUMENT SIGNER
proved on the basis of satisfactory evidence to be and acknowledged he/she executed the same.	the person whose name is subscribed to this instrument,
I certify under Penalty of Perjury under the laws	s of the State of
that the foregoing paragraph is true and correct.	
	Witness my hand and official seal.
	NOTARY PUBLIC
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Page 4 of 5

	DOMESTIC
Application No.	15/230,591
Attorney Docket No	7460-155507

6. FULL NAME OF ASSIGNOR:	RESIDENCE:
Frederick J. Geheb	Danvers, MA
EXECUTED thisday of	,2016
	SIGNATURE
STATE of)	
COUNTY of)	
On this day of, in	the year 2016, before me NOTARY PUBLIC NAME
a notary public, personally appeared	Frederick J. Geheb
	NAME OF DOCUMENT SIGNER to be the person whose name is subscribed to this instrument,
I certify under Penalty of Perjury under the	e laws of the State of
that the foregoing paragraph is true and co	rrect.
	Witness my hand and official seal.
	NOTARY PUBLIC
	S E
	, ,
7. FULL NAME OF ASSIGNOR: John C. Amann	RESIDENCE: Worcester, MA
EXECUTED thisday of	
ב. מאיז ארדוו	SIGNATURE
STATE of	
COUNTY of	
On this day of, in t	the year 2016, before me NOTARY PUBLIC NAME
a notary public, personally appeared	John C. Amann NAME OF DOCUMENT SIGNER
proved on the basis of satisfactory evidence and acknowledged he/she executed the san	to be the person whose name is subscribed to this instrument,
_	laws of the State of
that the foregoing paragraph is true and con	rrect. Witness my hand and official seal.
	NOTARY PUBLIC s
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Page 5 of 5

ASSIGNMENT

WHEREAS, as a below named inventor, I have invented certain new and useful
improvements in
WRIST-WORN DEVICE FOR COORDINATING PATIENT CARE (Invention Title)
for which a United States Provisional Patent application was filed on (mm/dd/yyyy) and bears Application Number (hereinafter "said application").
AND/OR for which I have this day executed an application for a United States Patent (hereinafter "said application"). AND/OR
X for which an application for a United States Patent was filed on <u>08/08/2016</u> (mm/dd/yyyy) and bears Application Number <u>15/230,591</u> (hereinafter "said application"). AND/OR
for which an international patent application was filed under the Patent Cooperation Treaty on(mm/dd/yyyy), bearing Application No(hereinafter "said application").
AND, WHEREAS, ZOLL MEDICAL CORPORATION, a corporation of Massachusetts, having a place of business at 269 Mill Road, Chelmsford, MA 01824-4105, hereinafter called the "assignee", is desirous of acquiring the entire right, title, and interest in and to said application and the inventions and improvements therein disclosed.
NOW, THEREFORE, for good and valuable consideration paid to me by said assignee, the receipt of which is hereby acknowledged, I as the inventor or as one of the inventors, hereinafter the assignor(s), do hereby assign, sell and transfer unto said assignee the full and exclusive right, title and interest in and to said application and the inventions and improvements therein disclosed for the United States and all foreign countries and any Letters Patent which may assue therefor in the United States and all foreign countries and all divisions, reissues, continuations, continuations-in-part, renewals and/or extensions thereof. Such assignment extends to the full ends of the terms of these applications and patents as fully and entirely as the same would have been held and enjoyed by me had this Assignment not been made.
I covenant that I am the lawful owner(s) of said application, inventions and improvements, that the same are unencumbered, that no license has been granted to make, use or wend the said inventions or improvements or any of them, and that I have the full right to make his Assignment.

	DOMESTIC
Application No	15/230,591
Attorney Docket No.	7460-155507

And for the consideration aforesaid, I agree individually and, if applicable, jointly that I will communicate to said assignee or the representatives thereof any facts known to me respecting said inventions and improvements, and will, upon request but without expense to me, testify in any legal proceedings, sign all lawful papers, execute all divisional, reissue, continuation, continuation-in-part, renewal and/or extension applications, make all rightful oaths, and generally do all other and further lawful acts deemed necessary or expedient by said assignee or by counsel for said assignee to assist or enable said assignee to obtain and enforce full benefits from the rights and interests herein assigned. This Assignment shall be binding upon my heirs, executors, administrators and/or assigns, and shall inure to the benefit of the heirs, executors, administrators, successors and/or assigns, as the case may be, of said assignee.

FULL NAME OF ASSIGNOR: Gary A. Freeman		RESIDENCE: Waltham, MA			orano.
EXECUTED thisday of	, 20	016			*
STATE of			**************************************	SIGNATURE	
On this day of	, in the year	2016	, before me		
DAY MONTH	-	YEAR	- 	NOTARY PUBLIC NA	ME
a notary public, personally appeared	***************************************		Gary A. Fre		
proved on the basis of satisfactory evic and acknowledged he/she executed th		e person			nstrument,
I certify under Penalty of Perjury under	er the laws of	the Sta	te of	•1 	Break and Co
that the foregoing paragraph is true an				tness my hand and o	fficial seal.
			**************************************	NOTARY PUBLIC	S E A L
***************************************	~~~	***	XXXXXXXX	.~~~	à

Checked Box indicates 3 additional page(s) for inventor signatures.

		Attorney Docket No. 7460-15550
2. FULL NAME OF ASSIGNOR: Michael Buonadonna	RESIDENCE:	nelmsford, MA
Witnessed by:		
Signature: Jany	Date:	3/8/19
Print Name: Jamie, Jung		,
Signature: 18		3/9/17
Print Name: Maki Brenner	- The second sec	
3. FULL NAME OF ASSIGNOR: Guy R. Johnson	RESIDENCE:	fagnolia, MA
EXECUTED thisday of,		
STATE of		SIGNATURE
COUNTY of)		
On this day of , in the ye a notary public, personally appeared	ar <u>2016</u> , befo	re me Notary Public Name
a notary public, personally appeared	year Guy	R. Johnson'
proved on the basis of satisfactory evidence to be and acknowledged he/she executed the same.	the person whose	e name is subscribed to this instrumen
I certify under Penalty of Perjury under the laws that the foregoing paragraph is true and correct.	of the State of _	Witness my hand and official sea
	·*************************************	NOTARY PUBLIC

Page 3 of 5

DOMESTIC 15/230,591

Application No.

	DOMESTIC
Application No.	15/230,591
Attorney Docket No.	7460-155507

4. FULL NAME OF ASSIGNOR: Justin R. Carroll	RESIDENCE: Shirley, MA
EXECUTED thisday of	, 2016
COTTA TENER OF	SIGNATURE
STATE of)	
COUNTY of)	•
On this day of, in the	the year 2016, before me,
a notary public, personally appeared	Justin R. Carroll
proved on the basis of satisfactory evidence and acknowledged he/she executed the same	to be the person whose name is subscribed to this instrument
	e laws of the State of
that the foregoing paragraph is true and con	
	Witness my hand and official seal
	NOTARY PUBLIC
	NOTAKY PUBLIC S
	E A
	L
5. FULL NAME OF ASSIGNOR: Annemarie Silver	RESIDENCE: Bedford, MA
EXECUTED thisday of	, 2016
	SIGNATURE
STATE of	
COUNTY of)	
On this day of, in the	the record 2016 hefers me
DAY MONTE	me year 2010, before me
MONIN	the year 2016, before me NOTARY PUBLIC NAME
a notary public, personally appeared	YEAR NOTARY PUBLIC NAME Annemarie Silver NAME OF DOCUMENT SIGNER
a notary public, personally appeared	Annemarie Silver NAME OF DOCUMENT SIGNER to be the person whose name is subscribed to this instrument
a notary public, personally appeared proved on the basis of satisfactory evidence and acknowledged he/she executed the same	Annemarie Silver NAME OF DOCUMENT SIGNER to be the person whose name is subscribed to this instrument. ne.
a notary public, personally appeared proved on the basis of satisfactory evidence to	Annemarie Silver NAMB OF DOCUMENT SIGNER to be the person whose name is subscribed to this instrument ne. claws of the State of
a notary public, personally appeared proved on the basis of satisfactory evidence and acknowledged he/she executed the same I certify under Penalty of Perjury under the	Annemarie Silver NAME OF DOCUMENT SIGNER to be the person whose name is subscribed to this instrument ne. laws of the State of
a notary public, personally appeared proved on the basis of satisfactory evidence and acknowledged he/she executed the same I certify under Penalty of Perjury under the	Annemarie Silver NAME OF DOCUMENT SIGNER to be the person whose name is subscribed to this instrument ne. claws of the State of meet. Witness my hand and official sea
a notary public, personally appeared proved on the basis of satisfactory evidence and acknowledged he/she executed the same I certify under Penalty of Perjury under the	Annemarie Silver NAME OF DOCUMENT SIGNER e to be the person whose name is subscribed to this instrument ne. e laws of the State of Trect. Witness my hand and official sea
a notary public, personally appeared proved on the basis of satisfactory evidence and acknowledged he/she executed the same I certify under Penalty of Perjury under the	Annemarie Silver NAME OF DOCUMENT SIGNER to be the person whose name is subscribed to this instrument ne. claws of the State of meet. Witness my hand and official sea

Page 4 of 5

•	DOMESTIC
Application No.	15/230,591
Attorney Docket No.	7460-155507

6. FULL NAME OF ASSIGNOR: Frederick J. Geheb		RESIDI	ENCE: Danver	s MA	
EXECUTED thisday of	, 20	16	Danver	O, 11111	interested the second process of the second
STATE of)				SIGNATUR	E
COUNTY of				÷	
On this day of, i	in the year	2016	, before me		
a notary public, personally appeared		YEAR	Frederick J.	notary pub Geheb	DLIC NAME
proved on the basis of satisfactory evider and acknowledged he/she executed the s	ice to be the	person	whose name i	s subscribed to	this instrument,
I certify under Penalty of Perjury under that the foregoing paragraph is true and		the Stat	te of	· · · · · · · · · · · · · · · · · · ·	- The conductive state of the
			Wit	ness my hand a	and official seal.
			***************************************	NOTARY PUB	S
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					y A L
7. FULL NAME OF ASSIGNOR: John C. Amann EXECUTED this day of	- was	RESIDI	ENCE:	ter, MA	L
John C. Amann EXECUTED thisday of	- was	RESIDI	ENCE:	2 · 4.0 · 4 · · · · · · · · · · · · · · · · ·	L
John C. Amann	- was	RESIDI	ENCE:	ter, MA	L
John C. Amann EXECUTED thisday of STATE of) COUNTY of)	, 20	RESIDI	ENCE: Worces	ter, MA SIGNATUR	E
John C. Amann EXECUTED thisday of STATE of	, 20	2016 YEAR	Worces	SIGNATUR	E
John C. Amann EXECUTED thisday of STATE of) COUNTY of) On thisday of, i	, 20 in the year	16 2016 YEAR	Worces , before me John C. Ar	SIGNATUR NOTARY PUE MAIN ENT SIGNER	E BLIC NAME ,
John C. Amann EXECUTED thisday of	in the year nee to be the same.	2016 YEAR	", before me John C. Ar NAME OF DOCUME whose name	SIGNATUR NOTARY PUE MAIN ENT SIGNER	E BLIC NAME ,
John C. Amann EXECUTED thisday of STATE of) COUNTY of) On thisday of, i DAYMONTH a notary public, personally appeared proved on the basis of satisfactory evider and acknowledged he/she executed the selectify under Penalty of Perjury under	in the year nee to be the same.	2016 YEAR	John C. Ar	SIGNATUR NOTARY PUE Mann ENT SIGNER is subscribed to	E BLIC NAME ,

Page 5 of 5