### PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4508168

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

#### **CONVEYING PARTY DATA**

Name	Execution Date
EMMA ELINA IKONEN	03/16/2015
KRISTIAN MATTI KARRU	03/16/2015
OTTO VALTTERI PEKANDER	03/16/2015

#### **RECEIVING PARTY DATA**

Name:	GENERAL ELECTRIC COMPANY	
Street Address:	1 RIVER ROAD	
City:	SCHENECTADY	
State/Country:	NEW YORK	
Postal Code:	12345	

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

Property Type	Number
Application Number:	15540919

#### **CORRESPONDENCE DATA**

**Fax Number:** (414)721-2572

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:** 262-798-4470

Email: HCTechnologies@ge.com
Correspondent Name: ELIZABETH K. DEVINS

Address Line 1: 9900 W. INNOVATION DRIVE

Address Line 2: RP2131

Address Line 4: WAUWATOSA, WISCONSIN 53226

ATTORNEY DOCKET NUMBER:	248456-3
NAME OF SUBMITTER:	ELIZABETH K. DEVINS
SIGNATURE:	/Elizabeth K. Devins/
DATE SIGNED:	07/18/2017

#### **Total Attachments: 5**

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PATENT REEL: 043032 FRAME: 0468

# COMBINED DECLARATION AND GLOBAL ASSIGNMENT FOR UTILITY OR DESIGN PATENT APPLICATION

As the below named inventor(s), l/we hereby declare that:

This declaration and assignment are directed to:

## WIRELESS MEDICAL BODY AREA NETWORK AND METHOD TO ASSOCIATE WIRELESS DEVICES THEREWITH

the specification of which is attached hereto OR
United States application or PCT international application number
filed on as
amended on [date] (if applicable).
(We hereby authorize and request the Company or its delegated attorneys or agents to insert above the application number and filing date of the application when known \

The above-identified application was made or authorized to be made by us.

We believe that we are original joint inventors of a claimed invention in the application.

We hereby acknowledge that any willful false statement made in this declaration is punishable under 18 USC § 1001 by fine or imprisonment of not more than five (5) years, or both.

We have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above.

We acknowledge the duty to disclose information which is material to the patentability of this application as defined in 37 CFR § 1.56, including, for continuation-in-part applications, material information which became available between the filing date of the prior application and the filing date of the continuation-in-part application.

In accordance with our obligation(s) under an Employee Innovation and Proprietary Information Agreement or (as applicable) arising out of other agreements (such as, but not limited to, the Services Agreement between General Electric Company, a New York corporation, and our employers), and/or for other good and valuable consideration of which we acknowledge receipt, I/we.

Inventor First Name	Inventor Middle Name	Inventor Last Name		Residence Town	Residence State	Residence Country
Emma	Elina	Ikonen	of	Helsinki	Uusimaa	Finland
Kristian	Matti	Karru	of	Helsinki	Uusimaa	Finland
Otto	Valtteri	Pekander	of	Helsinki	Uusimaa	Finland

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hereby sell and assign to:

Name of Company: General Electric Company
Entity Type (optional): New York corporation
Address: 1 River Road, Schenaclady, New York 12345 USA

herein referred to as "Company", its successors and assigns our entire respective rights, titles and interests in and to the invention and improvements made or conceived by us described in the application(s) listed above and in the following table:

Country of Filing	Type of Filing	Application Number	Filing Date	Title
United Kingdom	Patent	1423330.8		Wireless medical body area network and method to associate wireless devices therewith

(We hereby authorize and request the Company or its delegated attorneys or agents to insert above the application number and filing date of the application(s) when known.)

and any and all applications for patent and patents therefrom in any and all countries, including all divisions, continuations, continuations-in-part, reexaminations, renewals, and reissues thereof, and all rights of priority resulting from the filing of the application(s), and authorize and request any official whose duty it is to issue patents, to issue any patent on the inventions and improvements resulting therefrom to the Company, or its successors or assigns, and agree that on request and without further consideration, we will communicate to the Company or its representatives or nominees any facts known to us respecting the inventions and improvements and testify in any legal proceeding, make all rightful oaths, sign all lawful papers and execute all instruments or documents required or requested for the making and prosecution of any applications of any type for patent, utility model, or other similar rights in all countries including but not limited to, any provisional, non-provisional, continuation, continuation-in-part, divisional, renewal or substitute thereof, for any derivation proceedings relating thereto, and, as to any patents that issue from such applications, for any supplemental examination, derivation proceeding, opposition, post grant review, reissue, re-examination, inter partes review, or extension thereof, and generally do everything possible to aid the Company, its successors. assigns, and nominees to obtain and enforce proper patent protection for the invention and its improvements in all countries.

Remuneration claims of the inventor(s)/assignor(s) potentially arising from German Law on Employee Inventions, or any other respective country law, remain unaffected by this assignment. GE Docket No. 278456

INVENTOR 1	
Signature:Emma Elina Ikonen	Date:
Witnessed by: Signature	Date: <u>16 MAL 2015</u>
<u> </u>	
Witnessed by: Signature	- Date: <u>(f 1944 Z415</u>
Printed Name of Witness	
rimed Name of vydness	
SECTION BELOW IS FOR USE ONLY IF SIGN	NING IN PRESENCE OF A NOTARY
	ate:
Inventor Name	
STATE OF	
COUNTY OF	
This day of	before me personally came the above-named the individual who executed the foregoing a executed the same of his/her own free will for
Seal	
	(Notary Public)

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INVENTOR 2	
Signature. Kristian Matti Karru	Date: <u> </u>
Witnessed by:Signature	Date:
<u> </u>	
Witnessed by:	
Printed Name of Witness  SECTION BELOW IS FOR USE ONLY IF	SIGNING IN PRESENCE OF A NOTARY
	Date:
Inventor Name	
STATE OF ss.	
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Seal	
	(Notary Public)

INVENTOR 3	
Signature:Otto Valitieri Pekander	Date: <u> </u>
Witnessed by:Signature	Date: <u>((2 4444 2015)</u>
Printed Name of Witness	च
Witnessed by:Signature	Date: <u>/6 /298/_32015</u>
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	Date:
Inventor Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STATE OF SS.	
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	(Notary Public)

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