

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT4535558

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
KENSUKE SHINODA	07/20/2017
SHUHEI NITTA	07/21/2017
RECEIVING PARTY DATA	
Name:	TOSHIBA MEDICAL SYSTEMS CORPORATION
Street Address:	1385, SHIMOISHIGAMI
City:	OTAWARA-SHI, TOCHIGI
State/Country:	JAPAN
Postal Code:	324-8550
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	15639823
CORRESPONDENCE DATA	
Fax Number:	(703)413-2220
<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>	
Phone:	(703) 413-3000
Email:	mvukovic@oblon.com
Correspondent Name:	OBLON, ET AL.
Address Line 1:	1940 DUKE STREET
Address Line 4:	ALEXANDRIA, VIRGINIA 22314
ATTORNEY DOCKET NUMBER:	504678US
NAME OF SUBMITTER:	MARA VUKOVIC
SIGNATURE:	/Mara Vukovic/
DATE SIGNED:	08/04/2017
	This document serves as an Oath/Declaration (37 CFR 1.63).
Total Attachments: 2	
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