

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT4652231

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
DAVID BERRY	10/06/2017
MARTIN GIBLER	10/09/2017
BENJAMIN KRUPP	10/18/2017
VINCE DELBRUGGE	10/20/2017
KEVIN COWAN	10/17/2017
MICHAEL SPOHN	10/17/2017
RECEIVING PARTY DATA	
Name:	BAYER HEALTHCARE LLC
Street Address:	100 BAYER BOULEVARD
City:	WHIPPANY
State/Country:	NEW JERSEY
Postal Code:	07981
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	15568505
CORRESPONDENCE DATA	
Fax Number:	
<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:	4127672400
Email:	ripatents@bayer.com
Correspondent Name:	BAYER HEALTHCARE LLC
Address Line 1:	100 BAYER BOULEVARD
Address Line 4:	WHIPPANY, NEW JERSEY 07981
ATTORNEY DOCKET NUMBER:	BHC159014 PCT-US
NAME OF SUBMITTER:	JOSEPH L. KENT
SIGNATURE:	/Joseph L. Kent/
DATE SIGNED:	10/23/2017
This document serves as an Oath/Declaration (37 CFR 1.63).	

Total Attachments: 6

source=BHC159014PCTUS_Executed_Dec_Assignment#page1.tif

source=BHC159014PCTUS_Executed_Dec_Assignment#page2.tif

source=BHC159014PCTUS_Executed_Dec_Assignment#page3.tif

source=BHC159014PCTUS_Executed_Dec_Assignment#page4.tif

source=BHC159014PCTUS_Executed_Dec_Assignment#page5.tif

source=BHC159014PCTUS_Executed_Dec_Assignment#page6.tif

PATENT

REEL: 043920 FRAME: 0310

ASSIGNMENT WITH DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Whereas, I/We, the undersigned inventor(s) hereinafter called assignor(s), have invented certain improvements described in the application identified below; and

Whereas, **Bayer HealthCare LLC** a corporation organized and existing under the laws of the State of Delaware and having a place of business at 100 Bayer Boulevard, Whippany, NJ 07981, (assignee), desires to acquire the entire right, title, and interest in the application and invention, and to any United States patents to be obtained therefor;

Now therefore, for valuable consideration, receipt whereof is hereby acknowledged,

I/We, the above named assignor(s), hereby sell, assign and transfer to the above named assignee, its successors, legal representatives, and assigns, the entire right, title and interest in the invention and the application for the United States of America, including all direct and indirect divisions, continuations, and continuations-in-part thereof, and all original, extended, reissued, reviewed, and reexamined Letters Patent of the United States, and all countries foreign thereto, that may be granted thereon, including rights of priority under the International Convention of Paris (1883) as amended, including the right to claim priority under 35 U.S.C. §119, and I/we request the Director of the U.S. Patent and Trademark Office to issue any Letters Patent granted upon the invention set forth in the application to the assignee, its successors and assigns; and I/we hereby agree that the assignee may apply for foreign Letters Patent on the invention and I/we will execute without further consideration all papers deemed necessary by the assignee in connection with the United States and foreign applications when called upon to do so by the assignee, its successors, legal representatives, or assigns. I/We further represent and warrant that I/We have the full right to convey the interest assigned by this assignment, and that I/We have not granted any rights inconsistent with the rights granted herein. I/We further acknowledge an obligation of assignment of this invention to assignee at the time the invention was made and we further irrevocably designate and appoint assignee and its counsel as my/our attorney-in-fact and agent to act for and on my/our behalf to execute and file any document and to do all other lawfully permitted acts to further the purposes of this Agreement with the same legal force and effect as if executed by assignor himself/herself. I/We acknowledge that assignee is the real party in interest to any and all patent applications described in connection with this Agreement, and to any and all patent rights granted thereon.

As the below named inventor I hereby declare that:

This Assignment with Declaration is directed to:

- ☐ The attached application, or
- ☒ United States Application or PCT International Application
Number **PCT/US16/28824** filed on **April 22, 2016** (Confirmation
No.4303).

The application is entitled: **Syringe with Rolling Diaphragm**

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

I believe that I am the original inventor or an original joint inventor of a claimed invention in the application.

I have reviewed and understand the contents of the application and I am aware of the duty to disclose to the Office all information known to me to be material to patentability as defined in 37 CFR 1.56.

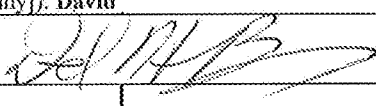
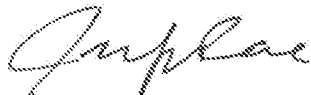
I hereby acknowledge that any willful false statement made in this Assignment with Declaration is punishable under 18 USC 1001 by fine or imprisonment of not more than five (5) years, or both.

Authorization To Permit Access To Application by Participating Office

☒ If checked, the undersigned hereby grants the USPTO authority to provide the European Patent Office (EPO), the Japan Patent Office (JPO), the Korean Intellectual Property Office (KIPO), the World Intellectual Property Office (WIPO), and any other intellectual property offices in which a foreign application claiming priority to the above-identified application is filed access to the above-identified patent application. See 37 CFR 1.14(c) and (h). This box should not be checked if the applicant does not wish the EPO, JPO, KIPO, or other intellectual property office in which a foreign application claiming priority to the above-identified application is filed to have access to the application.

In accordance with 37 CFR 1.14(h)(3), access will be provided to a copy of the application-as-filed with respect to: 1) the above-identified patent application-as-filed, 2) any foreign application to which the above-identified application claims priority under 35 USC 119(a)-(d) if a copy of the foreign application that satisfies the certified copy requirement of 37 CFR 1.55 has been filed in the above-identified patent application, and 3) any U.S. application-as-filed from which benefit is sought in the above-identified patent application.

In accordance with 37 CFR 1.14(c), access may be provided to information concerning the date of filing the Authorization to Permit Access to Application by Participating Office.

NAME OF SOLE OR FIRST INVENTOR:			
Given Name (first and middle [if any]): David		Family Name or Surname: Berry	
Inventor's signature 		Date 10/6/2017	
Residence: City: Kittanning	State: PA	Country: U.S.	Citizenship U.S.
Mailing Address: 277 Ping Wing Hollow Road, Kittanning, PA 16201 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared David Berry , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 6th day of October , 20 17			
Notary Public Signature 		Notary Public Printed Name: Jennifer M Rae	
[seal]		[stamp] <div style="border: 1px solid black; padding: 5px; text-align: center;">COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Jennifer M. Rae, Notary Public Indiana Twp., Allegheny County My Commission Expires Feb. 26, 2020 <small>MEMBER PENNSYLVANIA ASSOCIATION OF NOTARIES</small></div>	

NAME OF SECOND INVENTOR:			
Given Name (first and middle [if any]): Martin		Family Name or Surname: Gibler	
Inventor's signature		Date	
Residence: City: West Chester	State: OH	Country: U.S.	Citizenship
Mailing Address: 5854 Old Forest Lane, West Chester, OH 45069 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Martin Gibler , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20____			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF SOLE OR FIRST INVENTOR:			
Given Name (first and middle (if any)): David		Family Name or Surname: Berry	
Inventor's signature		Date	
Residence: City: Kittanning	State: PA	Country: U.S.	Citizenship
Mailing Address: 277 Ping Wing Hollow Road, Kittanning, PA 16201 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared David Berry , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF SECOND INVENTOR:			
Given Name (first and middle (if any)): Martin		Family Name or Surname: Gibler	
Inventor's signature <i>Martin Gibler</i>		Date 10/9/17	
Residence: City: West Chester	State: OH	Country: U.S.	Citizenship U.S.A.
Mailing Address: 5854 Old Forest Lane, West Chester, OH 45069 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Martin Gibler , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 9th day of October , 20 17 .			
Notary Public Signature <i>Sheree L. Mills</i>		Notary Public Printed Name: Sheree L. Mills	
[seal]		[stamp]	



Sheree L. Mills
Notary Public, State of Ohio
My Commission Expires 09-17-2019

NAME OF THIRD INVENTOR:			
Given Name (first and middle [if any]): Benjamin		Family Name or Surname: Krupp	
Inventor's signature <i>Benjamin Krupp</i>		Date <i>10/18/2017</i>	
Residence: City: Cincinnati	State: OH	Country: U.S.	Citizenship <i>U.S.A.</i>
Mailing Address: 114 Congress Run Road, Cincinnati, OH 45215 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Benjamin Krupp , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20____.			
Notary Public Signature <i>Jane He Mas</i>		Notary Public Printed Name: <i>Jane He Mas</i>	
[seal]		[stamp] JANETTE ABS NOTARY PUBLIC - OHIO MY COMMISSION EXPIRES FEBRUARY 25TH 2019	

NAME OF FOURTH INVENTOR:			
Given Name (first and middle [if any]): Vincent		Family Name or Surname: Delbrugge	
Inventor's signature		Date	
Residence: City: Indiana	State: PA	Country: U.S.	Citizenship
Mailing Address: 218 Courtland Road, Indiana, PA 15701 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Vincent Delbrugge , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20____.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF THIRD INVENTOR:			
Given Name (first and middle [if any]): Benjamin		Family Name or Surname: Krupp	
Inventor's signature		Date	
Residence: City: Cincinnati	State: OH	Country: U.S.	Citizenship
Mailing Address: 114 Congress Run Road, Cincinnati, OH 45215 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Benjamin Krupp , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF FOURTH INVENTOR:			
Given Name (first and middle [if any]): Vince		Family Name or Surname: Delbrugge	
Inventor's signature <i>Vince Delbrugge</i>		Date 10.20.17	
Residence: City: Indiana	State: PA	Country: U.S.	Citizenship U.S.
Mailing Address: 218 Courtland Road, Indiana, PA 15701 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Vincent Delbrugge , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 20th day of October , 20 17 .			
Notary Public Signature <i>Jennifer M. Rae</i>		Notary Public Printed Name: Jennifer M. Rae	
[seal]		[stamp] COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Jennifer M. Rae, Notary Public Indiana Twp., Allegheny County My Commission Expires Feb. 26, 2020	

NAME OF FIFTH INVENTOR:			
Given Name (first and middle [if any]): Kevin		Family Name or Surname: Cowan	
Inventor's signature <i>Kevin Cowan</i>		Date 17 Oct 2017	
Residence: City: Allison Park	State: PA	Country: U.S.	Citizenship: USA
Mailing Address: 4242 Estates Court, Allison Park, PA 15101 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Kevin Cowan , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 17th day of October , 20 17			
Notary Public Signature <i>Jennifer M. Rae</i>		Notary Public Printed Name: Jennifer M. Rae	
[seal]		[stamp] COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Jennifer M. Rae, Notary Public Indiana Twp., Allegheny County My Commission Expires Feb. 26, 2020 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES	

NAME OF SIXTH INVENTOR:			
Given Name (first and middle [if any]): Michael		Family Name or Surname: Spohn	
Inventor's signature <i>Michael Spohn</i>		Date 17 Oct 2017	
Residence: City: Fenelton	State: PA	Country: U.S.	Citizenship: USA
Mailing Address: 2814 Old Route 422 East, Fenelton, PA 16034 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Michael Spohn , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 17th day of October , 20 17			
Notary Public Signature <i>Jennifer M. Rae</i>		Notary Public Printed Name: Jennifer M. Rae	
[seal]		[stamp] COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Jennifer M. Rae, Notary Public Indiana Twp., Allegheny County My Commission Expires Feb. 26, 2020 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES	