

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT4796128

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
MARVIN(DECEASED) KIMBERLY WITTEN EXECUTOR JOSEPH DABNER	01/09/2018
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	KIMBERLY MARIE WITTEN
<b>Street Address:</b>	37086 MARCIEL AVENUE
<b>City:</b>	MADERA
<b>State/Country:</b>	CALIFORNIA
<b>Postal Code:</b>	93636
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
<b>Application Number:</b>	29538858
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	
<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>	
<b>Phone:</b>	559-416-6667
<b>Email:</b>	WITTENKM@YAHOO.COM
<b>Correspondent Name:</b>	KIMBERLY WITTEN
<b>Address Line 1:</b>	37086 MARCIEL AVENUE
<b>Address Line 4:</b>	MADERA, CALIFORNIA 93636
<b>NAME OF SUBMITTER:</b>	KIM WITTEN
<b>SIGNATURE:</b>	/kim witten/kim witten 01/26/2018
<b>DATE SIGNED:</b>	01/26/2018
This document serves as an Oath/Declaration (37 CFR 1.63).	
<b>Total Attachments: 3</b>	
source=Joe Dabner Death Cert.Executor Papers BW#page1.tif	
source=Joe Dabner Death Cert.Executor Papers BW#page2.tif	
source=Joe Dabner Death Cert.Executor Papers BW#page3.tif	

## STATE OF CALIFORNIA

## CERTIFICATION OF VITAL RECORD

## COUNTY OF MADERA

## PUBLIC HEALTH DEPARTMENT

MADERA, CALIFORNIA 93638

3052017265405

## CERTIFICATE OF DEATH

320172000901

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEASED - FIRST (Given)		2. MIDDLE	
MARVIN		JOSEPH	
3. LAST (Family)		DABNER	
4. DATE OF BIRTH - month/day		5. AGE - Year	
12/19/1954		63	
6. SEX		7. ISSUED FOR YEAR	
M		None	
8. BIRTH STATE/FOREIGN COUNTRY		9. SOCIAL SECURITY NUMBER	
CA		548-94-4177	
10. EVER IN U.S. ARMY OR FOREST		11. MARITAL STATUS - (Date of Birth)	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		DIVORCED	
12. DATE OF DEATH - month/day		13. HOUR - (24 Hours)	
12/31/2017		1037	
14. EDUCATION - Highest Level (Grade)		15. DECEASED'S RACE - (Up to 5 races they be listed here without restriction)	
HS GRADUATE		CAUCASIAN	
16. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		17. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, retail store, etc.)	
LUMBER		BEVERAGE INDUSTRY	
18. YEARS IN OCCUPATION		19. DECEASED'S RESIDENCE (Street and number or location)	
35		19794 STANTON AVE #209	
20. CITY		21. COUNTY	
CASTRO VALLEY		ALAMEDA	
22. ZIP CODE		23. YEARS IN CALIFORNIA	
94548		35	
24. STATE/FOREIGN COUNTRY		25. DECEASED'S NAME, RELATIONSHIP	
CA		KIM WITTEN, DAUGHTER	
26. NAME OF SURVIVING SPOUSE - FIRST		27. NAME OF SURVIVING SPOUSE - LAST	
MARNE		BOERNER	
28. MIDDLE		29. LAST (Family)	
JAESSERY		DABNER	
30. BIRTH STATE		31. BIRTH DATE	
CA		CA	
32. PLACE OF FINAL DISPOSITION		33. DATE OF DEATH	
DAUGHTER'S RESIDENCE KIM WITTEN		01/05/2018	
37086 MARCIEL AVE, MADERA, CA 93636		34. TYPE OF DISPOSITION	
CR/RES		35. SIGNATURE OF EMERALD	
AFFORDABLE DIRECT CREMATIONS		NOT EMBALMED	
36. LICENSE NUMBER		37. SIGNATURE OF LOCAL REGISTRAR	
FD2098		THOMAS E COLE, MD	
38. DATE - month/day		39. LICENSE NUMBER	
01/05/2018		50	
40. PLACE OF DEATH		41. IF OTHER THAN HOSPITAL, SPECIFY ONE	
DAUGHTER'S RESIDENCE		Home	
42. COUNTY		43. CITY	
MADERA		MADERA	
44. FACTORY ADDRESS OR LOCATION WHERE DEATH OCCURRED (Street and number or location)		45. DEATH REPORTED TO CORONER	
37086 MARCIEL AVE		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
46. CAUSE OF DEATH		47. DEATH REPORTED TO CORONER	
PENDING TOXICOLOGY		17-5711	
48. CAUSE OF DEATH		49. DEATH REPORTED TO CORONER	
PENDING TOXICOLOGY		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
50. CAUSE OF DEATH		51. DEATH REPORTED TO CORONER	
PENDING TOXICOLOGY		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
52. CAUSE OF DEATH		53. DEATH REPORTED TO CORONER	
PENDING TOXICOLOGY		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
54. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE OF DEATH		55. DEATH REPORTED TO CORONER	
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
56. WAS OPERATOR PERFORMED FOR ANY CONDITION IN ITEM 54 OR 55? (If yes, list type of operation and date)		57. IF FEMALE, PREVIOUS BIRTH YEAR	
		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN	
58. SIGNATURE AND TITLE OF CORONER		59. LICENSE NUMBER	
MARICELA DAVIS		117	
60. TYPE AT BIRTH (NAME, DATE, SEX, MIDDLE AND ADDRESS, ZIP CODE)		61. DATE - month/day	
		01/05/2018	
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268. TYPE AT BIRTH (NAME			

**Affidavit for Collection of Personal Property**  
**California Probate Code Section 13100**

The undersigned state(s) as follows:

1. Marvin Joseph Dabner died on Dec. 31st, 2017, in the County of Madera, State of California.

2. At least 40 days have elapsed since the death of the decedent, as shown in a certified copy of the decedent's death certificate attached to this affidavit or declaration.

3. ☒ No proceeding is now being or has been conducted in California for administration of the decedent's estate.

OR

☐ The decedent's personal representative has consented in writing to the payment, transfer, or delivery to the affiant or declarant of the property described in the affidavit or declaration.

4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in Section 13050 of the California Probate Code, does not exceed one hundred fifty thousand dollars (\$150,000).

5. ☐ An inventory and appraisal of the real property included in the decedent's estate is attached.

☒ There is no real property in the estate.

6. The following property to be transferred, delivered, or paid to the affiant under the provisions of California Probate Code section 13100:

7. The successor(s) of the decedent, as defined in Probate Code Section 13006 is/are:

Kimberly Marie Witten

8. The undersigned

☒ The affiant or declarant is the successor of the decedent (as defined in Section 13006 of the California Probate Code) to the decedent's interest in the described property.

☐ The affiant or declarant is authorized under Section 13051 of the California Probate Code to act on behalf of the successor of the decedent (as defined in Section 13006 of the California Probate Code) with respect to the decedent's interest in the described property.

9. No other person has a superior right to the interest of the decedent in the described property.

10. The affiant or declarant requests that the described property be paid, delivered, or transferred to the affiant or declarant.

The affiant or declarant affirms or declares under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: 1/9/2018

Signed: Kimberly Marie Witten

\_\_\_\_\_  
\_\_\_\_\_

**CALIFORNIA JURAT WITH AFFIANT STATEMENT**

**GOVERNMENT CODE § 8202**

- ☒ See Attached Document (Notary to cross out lines 1-6 below)  
☐ See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary)

1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_  
 5. \_\_\_\_\_

Kimberly Marie Witten  
 Signature of Document Signer No. 1

Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

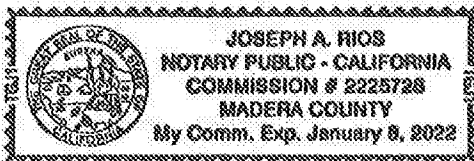
State of California  
 County of Madera

Subscribed and sworn to (or affirmed) before me  
 on this 11 day of January, 2018,  
 by \_\_\_\_\_  
 Date Month Year

(1) Kimberly Marie Witten  
 (and (2) \_\_\_\_\_),  
 Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence  
 to be the person(s) who appeared before me.

Signature Joseph A. Rios  
 Signature of Notary Public



Seal  
 Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: Affidavit for Attachment of Personal Property Document Date: January 11, 2018  
 Number of Pages: 1 Signer(s) Other Than Named Above: \_\_\_\_\_