

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT4994319

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
HEATHER GAMBLE	04/05/2018
GHOLAMREZA JAVAHERY	04/30/2018
LISA COUSINS	04/06/2018
CHARLES JOLLIFFE	04/13/2018
RECEIVING PARTY DATA	
Name:	PERKINELMER HEALTH SCIENCES CANADA INC.
Street Address:	501 ROWNTREE DAIRY ROAD
City:	WOODBIDGE
State/Country:	CANADA
Postal Code:	L4L8H1
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	15958781
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NAME OF SUBMITTER:	MATTHEW ZISCHKA
SIGNATURE:	/Matthew Zischka/
DATE SIGNED:	06/06/2018
Total Attachments: 3	
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ASSIGNMENT

WHEREAS, we, *Heather GAMBLE, Gholamreza JAVAHERY, Lisa COUSINS, and Charles JOLLIFFE*, whose full post office address is *40 Church St. South, Richmond Hill, Ontario, L4C 1W2, Canada, 4660 Aurora Road, R.R.#2, Kettleby, Ontario, L0G 1J0, Canada, 9 Fontebello Avenue, Woodbridge, Ontario, L4K 2K8, Canada, and 93 Centre Street, R.R.#3, Schomberg, Ontario, L0G 1T0, Canada*, respectively, have invented an invention entitled **DUAL CHAMBER ELECTRON IMPACT AND CHEMICAL IONIZATION SOURCE**, for which a patent application is about to be filed in the United States;

AND WHEREAS, *PERKINELMER HEALTH SCIENCES CANADA INC.*, whose full post office address is *501 Rowntree Dairy Road, Woodbridge, Ontario, L4L 8H1, Canada*, is desirous of acquiring an interest therein;

AND WHEREAS, the serial number and filing date of the U.S. application, when assigned, should be entered here following:

Serial No.:

Filing Date:

NOW THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, we, *Heather GAMBLE, Gholamreza JAVAHERY, Lisa COUSINS, and Charles JOLLIFFE*, by these presents do sell, assign, and transfer, and do hereby confirm the sale, assignment, and transfer unto *PERKINELMER HEALTH SCIENCES CANADA INC.* of our full, right, title, and interest for the United States of America and all other countries foreign thereto, in, and to the said invention, as described in the said application; said invention, said application, any other applications for Letters Patent for said invention, and all Letters Patent issuing from such applications, to be held and enjoyed by the *PERKINELMER HEALTH SCIENCES CANADA INC.*, for its own use and benefit and for its legal representatives, to the full end of the term for which said Letters Patent may be granted, as fully and entirely as the same would have been held by us had this assignment and sale not been made.

We, *Heather GAMBLE, Gholamreza JAVAHERY, Lisa COUSINS, and Charles JOLLIFFE*, undertake to sign such further documents to effect the aforesaid sale, transfer, and assignment as may be required from time to time, without reimbursement, but at the expense of *PERKINELMER HEALTH SCIENCES CANADA INC.*

The serial number and filing date of said application not yet having been assigned, we, *Heather GAMBLE, Gholamreza JAVAHERY, Lisa COUSINS, and Charles JOLLIFFE*, hereby authorize the entry of the serial number and filing date in the recitations of this assignment for the purposes of identification.

of April EXECUTED at Woodbridge, ON, Canada, this 5th day
2018.

Heather Gamble
Heather GAMBLE

I, Heather Gamble, whose full post office address is
40 Church St. South, Richmond Hill, ON, Canada L4C 1W2
hereby declare that I was personally present and did see Heather GAMBLE, who is personally known
to me to be the person named in the above assignment, duly sign and execute the same.

[Signature]
Signature of Witness

of April EXECUTED at Woodbridge, ON, Canada, this 30th day
2018.

[Signature]
Gholamreza JAVAHERY

I, Heather Gamble, whose full post office address is
40 Church St. South, Richmond Hill, ON, L4C 1W2
hereby declare that I was personally present and did see Reza JAVAHERY, who is personally known
to me to be the person named in the above assignment, duly sign and execute the same.

Heather Gamble
Signature of Witness

of April EXECUTED at Woodbridge, ON, Canada, this 6th day
2018.



Lisa COUSINS

I, Josh Ye, whose full post office address is
38 Lebonic Drive, Richmond Hill, L4E 5C6
hereby declare that I was personally present and did see Lisa COUSINS, who is personally known to
me to be the person named in the above assignment, duly sign and execute the same.



Signature of Witness

of April EXECUTED at Woodbridge, ON, Canada, this 13th day
2018.



Charles JOLLIFFE

I, Heather Gamble, whose full post office address is
40 Church St. South, Richmond Hill, ON, L4C 1W2
hereby declare that I was personally present and did see Charles JOLLIFFE, who is personally
known to me to be the person named in the above assignment, duly sign and execute the same.



Signature of Witness