

PATENT ASSIGNMENT COVER SHEET

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Stylesheet Version v1.2

EPAS ID: PAT5058767

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
ROBERT E. TURBETT	07/19/2018
RECEIVING PARTY DATA	
Name:	TURBETT SURGICAL, LLC
Street Address:	125 TECH PARK DRIVE
City:	ROCHESTER
State/Country:	NEW YORK
Postal Code:	14623
PROPERTY NUMBERS Total: 2	
Property Type	Number
Application Number:	16040058
PCT Number:	US2018042884
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>	
Email:	patent@hselaw.com
Correspondent Name:	JODI A. REYNOLDS, ESQ.
Address Line 1:	1600 BAUSCH & LOMB PLACE
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ATTORNEY DOCKET NUMBER:	99374.000042
NAME OF SUBMITTER:	JODI A. REYNOLDS
SIGNATURE:	/Jodi A. Reynolds/
DATE SIGNED:	07/19/2018
This document serves as an Oath/Declaration (37 CFR 1.63).	
Total Attachments: 3	
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source=99374-42_Assignment_and_Declaration#page3.tif	

ASSIGNMENT and DECLARATION OF INVENTORSHIP

Applicant:	Turbett Surgical, LLC
First Named Inventor:	Robert E. Turbett
Attorney Docket No.:	99374.000042
Application No.:	tbd
Filed:	July 19, 2018
TITLE: STERILIZATION WRAP SYSTEM	

FOR GOOD AND VALUABLE CONSIDERATION, **I**, the **SOLE INVENTOR** and **ASSIGNOR**:

Robert E. Turbett, a US citizen residing at:
105 Woodside Drive, Penfield, NY, 14526

HEREBY ASSIGN to the ASSIGNEE:

Turbett Surgical, LLC, a US corporation existing under the laws of the State of Delaware, with a business mailing address at:
125 Tech Park Drive, Rochester, NY 14623

ALL RIGHT, TITLE, AND INTEREST WORLDWIDE in and to the invention described in the above-identified US nonprovisional application entitled STERILIZATION WRAP SYSTEM, claiming priority to US provisional application 62/534,494 filed July 19, 2017; and in and to said US patent application and all applications that may be filed on said invention anywhere in the world, including any and all divisions, reissues, continuations, and extensions thereof and in and to any Letters Patents, Inventors' Certificates, Design Registrations, Industrial Models, Utility Models, and all other forms of protection that may be granted thereon, including the right to file applications and the right to claim priority from the US application worldwide, and including the right to pursue and obtain any damages, recoveries, or remedies for past infringements of these protections.

ASSIGNOR covenants that no assignment, license, or encumbrance has been or will be made that would conflict with this Assignment.

ASSIGNOR requests that all Letters Patents, Inventors' Certificates, Design Registrations, Industrial Models, Utility Models and all other forms of protection on said invention be issued to the ASSIGNEE, and **ASSIGNOR** agrees to cooperate fully in obtaining and enforcing patent protection for said invention, including communicating any facts relating to said invention, signing lawful papers, and, at the request and expense of the ASSIGNEE, but without compensation, testifying in legal proceedings.

INVENTOR HEREBY DECLARES:

The Declaration is directed to the above-identified application entitled STERILIZATION WRAP SYSTEM.

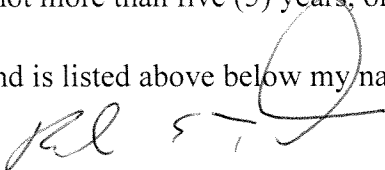
The referenced application was made or authorized to be made by me.

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

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

My mailing address is the same as my residence and is listed above below my name.

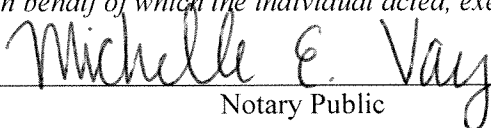
Dated: 7/19/18



Robert E. Turbett

STATE OF New York)
COUNTY OF MONROE) ss

On the 19th day of July in the year 2018, before me, the undersigned, a Notary Public in and for said State, personally appeared **Robert E. Turbett**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.



Notary Public

Seal

MICHELLE E. VAY
Notary Public, State of New York
No. 01VA6337430
Qualified in Monroe County
Commission Expires February 29, 2020