## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT5102728

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	ASSIGNMENT	

#### **CONVEYING PARTY DATA**

Name	Execution Date
ERIK NILS OSTLUND	03/22/2016

#### **RECEIVING PARTY DATA**

Name:	GE HEALTHCARE BIO-SCIENCES AB		
Street Address:	BJORKGATAN 30		
City:	UPPSALA		
State/Country:	SWEDEN		
Postal Code:	SE 751 84		

#### **PROPERTY NUMBERS Total: 1**

Property Type	Number
Application Number:	16078681

#### **CORRESPONDENCE DATA**

**Fax Number:** (404)853-8806

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.

**Phone:** 404.853.8000

Email:cindylehmuth@eversheds-sutherland.comCorrespondent Name:EVERSHEDS SUTHERLAND (US) LLP

Address Line 1: 999 PEACHTREE STREET, N.E.

Address Line 2: SUITE 2300

Address Line 4: ATLANTA, GEORGIA 30309

<b>ATTORNEY DOCKET NUMBER:</b> 282786-6 (34428-0289)	
NAME OF SUBMITTER:	WILLIAM L. WARREN, REG. NO. 36,714
SIGNATURE:	/WILLIAM L. WARREN/
DATE SIGNED:	08/22/2018

### **Total Attachments: 3**

source=34428\_0289\_Declaration\_Assignment#page1.tif source=34428\_0289\_Declaration\_Assignment#page2.tif source=34428\_0289\_Declaration\_Assignment#page3.tif

PATENT 505055973 REEL: 046657 FRAME: 0911

# COMBINED DECLARATION AND GLOBAL ASSIGNMENT FOR UTILITY OR DESIGN PATENT APPLICATION

As the below named inventor, I hereby declare that:						
This declaration and assignment are directed to: A METHOD AND A MEASURING DEVICE FOR MEASURING THE ABSORBANCE OF A SUBSTANCE IN AT LEAST ONE SOLUTION						
the specification of which is attached hereto OR						
	and the state of t					
	(I hereby a	amended on [date] (if applicable).  (I hereby authorize and request the Company or its delegated attorneys or agents to insert above the application number and filing date of the application when known.)				
The above-	identified appl	ication was made	e or a	authorized to be ma	ade by me.	
I believe tha	at I am the orig	ginal inventor of a	claiı	med invention in th	e application.	
I hereby acknowledge that any willful false statement made in this declaration is punishable under 18 USC § 1001 by fine or imprisonment of not more than five (5) years, or both.						
	I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above.					
I acknowledge the duty to disclose information which is material to the patentability of this application as defined in 37 CFR § 1.56, including, for continuation-in-part applications, material information which became available between the filing date of the prior application and the filing date of the continuation-in-part application.						
In accordance with my obligation(s) under an Employee Innovation and Proprietary Information Agreement or (as applicable) arising out of other agreements (such as, but not limited to, the Services Agreement between General Electric Company or any of its affiliates, and my employer), and/or for other good and valuable consideration of which I acknowledge receipt, I,						
Inventor First Name	Inventor Middle Name	Inventor Last Name		Residence Town	Residence State	Residence Country
Erik	Nils	OSTLUND	of	Uppsala		Sweden
nereby sell and assign to:						
Name of Cor	npany: GE He	ealthcare Bio-Scie	ence	s AB		
Entity Type (	optional):					
Address: Bj	orkgatan 30,	BL3-3, SE 751 84	I, Up	psala, Sweden		

herein referred to as "Company", its successors and assigns my entire right, title and interest in and to the invention and improvements made or conceived by me described in the application(s) listed above and in the following table:

Country of Filing	Type of Filing	Application Number	Filing Date	Title
GB	Priority	1603051.2	23Feb2016	A METHOD AND A MEASURING DEVICE FOR MEASURING THE ABSORBANCE OF A SUBSTANCE IN AT LEAST ONE SOLUTION

(I hereby authorize and request the Company or its delegated attorneys or agents to insert above the application number and filing date of the application(s) when known.)

and any and all applications for patent and patents therefrom in any and all countries, including all divisions, continuations, continuations-in-part, reexaminations, renewals, and reissues thereof, and all rights of priority resulting from the filing of the application(s), and authorize and request any official whose duty it is to issue patents, to issue any patent on the inventions and improvements resulting therefrom to the Company, or its successors or assigns, and agree that on request and without further consideration, I will communicate to the Company or its representatives or nominees any facts known to me respecting the inventions and improvements and testify in any legal proceeding, make all rightful oaths. sign all lawful papers and execute all instruments or documents required or requested for the making and prosecution of any applications of any type for patent, utility model, or other similar rights in all countries including, but not limited to, any provisional, non-provisional, continuation, continuation-in-part, divisional, renewal or substitute thereof, for any derivation proceedings relating thereto, and, as to any patents that issue from such applications, for any supplemental examination, derivation proceeding, opposition, post grant review, reissue, re-examination, inter partes review, or extension thereof, and generally do everything possible to aid the Company, its successors, assigns, and nominees to obtain and enforce proper patent protection for the invention and its improvements in all countries.

Remuneration claims of the inventor/assignor potentially arising from German Law on Employee Inventions, or any other respective country law, remain unaffected by this assignment.

INVENTOR	
Signature: <u>Janh</u> Oulm) OSTLUND, Erik, Nils	Date:
Witnessed by: Signature	Date: 2016-May-22
Printed Name of Witness	
Witnessed by: Signature	Date: 2016-Mar-22
CHRISTER ENIKSSON Printed Name of Witness	
SECTION BELOW IS FOR USE ONLY IF SIGNING	IN PRESENCE OF A NOTARY
Date:	
Inventor Name OSTLUND, Erik, Nils	
STATE OF	
COUNTY OF	
This day of,book amend OSTLUND, Erik, Nils, to me personally know foregoing assignment, who acknowledged to me that he free will for the purposes therein set forth.	wn as the individual who executed the
Seal	
188-49-19-19-19-19-19-19-19-19-19-19-19-19-19	(Notary Public)

Page 3 of 3