

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5298141

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
GARY A. FREEMAN	11/10/2014
WARD HAMILTON	12/05/2014
DEBORAH T. JONES	12/05/2014
DAVID N. CRAIGE III	12/03/2014
MELISSA M. DASCOLI	12/03/2014
E. JANE WILSON	12/04/2014
IAN B. DURANT	12/04/2014
RECEIVING PARTY DATA	
Name:	ZOLL MEDICAL CORPORATION
Street Address:	269 MILL ROAD
City:	CHELMSFORD
State/Country:	MASSACHUSETTS
Postal Code:	01824
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16231443
CORRESPONDENCE DATA	
Fax Number:	(412)471-4094
<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:	412-471-8815
Email:	assignments@webblaw.com
Correspondent Name:	THE WEBB LAW FIRM
Address Line 1:	420 FT. DUQUESNE BLVD.
Address Line 2:	SUITE 1200
Address Line 4:	PITTSBURGH, PENNSYLVANIA 15222
ATTORNEY DOCKET NUMBER:	7460-1806972
NAME OF SUBMITTER:	RYAN J. MILLER
SIGNATURE:	/Ryan J. Miller/
DATE SIGNED:	12/22/2018

PATENT

Total Attachments: 9

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ASSIGNMENT

For good and valuable consideration, the sufficiency and receipt of which is hereby acknowledged, We, the undersigned

Gary A. Freeman of **47 Stearns Street, Newton Center, Massachusetts 02159;**
Ward Hamilton of **73 Mack Hill Road, Amherst, New Hampshire 03031;**
Deborah T. Jones of **21 Goldfinch Drive, Dartmouth, Massachusetts 02747;**
David N. Craige, III of **53 Oakridge Avenue, Attleboro, Massachusetts 02703;**
Melissa M. Dascoli of **12 Old Nahant Road, Wakefield, Massachusetts 01880;**
E. Jane Wilson of **14 Porters Cove Road, Hingham, Massachusetts 02042;** and
Ian B. Durant of **19 Channing Road, Watertown, Massachusetts 02472,** respectively,
hereby:

Sell, assign and transfer to **ZOLL MEDICAL CORPORATION**, a Massachusetts corporation having a place of business at **269 Mill Road, Chelmsford, Massachusetts 01824,** its successors, assigns and legal representatives, all hereinafter referred to as said Assignee, the entire right, title and interest for the United States and all foreign countries, in and to any and all inventions which are disclosed in an application for Letters Patent filed in the United States Patent and Trademark Office on:

September 23, 2014

ENTER FILING DATE ABOVE

under Application Serial No. 14/494,084 and

Entitled **UNIVERSAL DEFIBRILLATION ELECTRODE PAD ASSEMBLY FOR ADULT AND PEDIATRIC SUBJECTS,**

and in and to said application and all continuing, divisional, continuation-in-part, substitute, renewal, reissue and all other applications for Letters Patent which have been or shall be filed in the United States and all foreign countries on said any and all inventions, including a provisional application filed on **September 30, 2013** under Application Serial No. **61/884,264** and entitled **UNIVERSAL DEFIBRILLATION ELECTRODE PAD ASSEMBLY FOR ADULT AND PEDIATRIC SUBJECTS;** and in and to all original and reissued patents which have been or shall be issued in the United States and all foreign countries on said any and all inventions including the right to apply for patent rights in each foreign country and all rights to priority; and further including any right to sue for past infringement;

Appoint, authorize and request the attorneys appointed in said application to hereafter complete this assignment by inserting in the spaces provided above the filing date and serial number of said application when known;

Agree that said Assignee may apply for and receive Letters Patent for said any and all inventions in its own name; and when requested, without charge to but at the expense of said Assignee, We agree to carry out in good faith the intent and purpose of this assignment, by executing all divisional, continuing, substitute, renewal, reissue, and all other patent applications on said any and all inventions, by executing all rightful oaths, assignments, powers of attorney and other

papers, by communicating to said Assignee all facts known to relating to said any and all inventions and the history thereof, and generally by doing everything reasonably possible which said Assignee shall consider desirable for aiding in securing and maintaining proper patent protection for said any and all inventions and for vesting title to said any and all inventions and all applications for patents and all patents on said inventions, in said Assignee;

Request the Honorable Commissioner of Patents and Trademarks to issue said Letters Patent to said Assignee; and

Covenant with said Assignee that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been made to others by me and that full right to convey the same as herein expressed is possessed by me.

Said Assignee does hereby acknowledge and accept the above sale, assignment and transfer of all the rights, title and interest enumerated above, including but not limited to the right to priority and the right to sue for past infringement.

November 10, 2014
Date

Gary A. Freeman
Gary A. Freeman

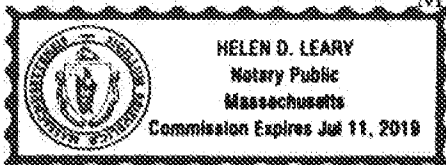
STATE OF Massachusetts :
COUNTY OF Middlesex :

On this 10th day of November, 2014, before me, the undersigned notary public, personally appeared GARY A. FREEMAN (name of document signer), proved to me through satisfactory evidence of identification, which were known to me, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Helen D. Leary

(SEAL) Printed name of Notary: Helen D. Leary

My commission expires: July 11, 2019



12/5/14
Date
Ward Hamilton
Ward Hamilton

STATE OF Massachusetts ;
COUNTY OF Worcester ;

On this 5th day of December 2014, before me, the undersigned notary public, personally appeared Ward Hamilton (name of document signer), proved to me through satisfactory evidence of identification, which were known to me, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Helen D. Leary

(SEAL)

Printed name of Notary: Helen D. Leary

My commission expires: July 11, 2019



12/5/14
Date

Deborah T. Jones
Deborah T. Jones

STATE OF Rhode Island
COUNTY OF Providence

On this 5th day of December, 2014, before me, the undersigned notary public, personally appeared Deborah T. Jones (name of document signer), proved to me through satisfactory evidence of identification, which were MA license, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Patricia Da Rocha

(SEAL) Printed name of Notary: PATRICIA DAROCHA


My commission expires: MAY 10, 2015

12-3-14
Date


David N. Craig, III

STATE OF Rhode Island :
COUNTY OF Providence :

On this 3rd day of December, 2014, before me, the undersigned notary public, personally appeared David N. Craig III (name of document signer), proved to me through satisfactory evidence of identification, which were MA license, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.


(SEAL) Printed name of Notary: PATRICIA DAROCHA
My commission expires: MAY 10, 2015

12/3/2014
Date

Melissa M. Dascoli
Melissa M. Dascoli

STATE OF Massachusetts :
COUNTY OF Middlesex :

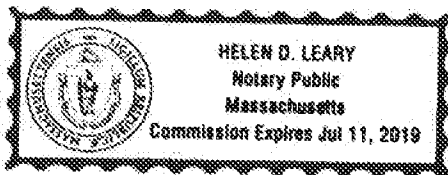
On this 3rd day of December, 2014, before me, the undersigned notary public, personally appeared Melissa Dascoli (name of document signer), proved to me through satisfactory evidence of identification, which were known to me, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Helen D. Leary

(SEAL)

Printed name of Notary: Helen D. Leary

My commission expires: July 11, 2019

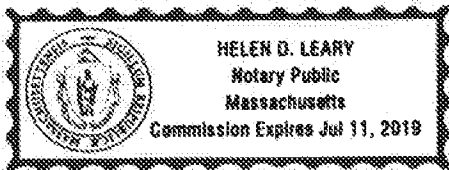


Date 12/04/14 E. Jane Wilson
E. Jane Wilson

STATE OF Massachusetts :
COUNTY OF Middlesex :

On this 4th day of December 2014, before me, the undersigned notary public, personally appeared E. Jane Wilson (name of document signer), proved to me through satisfactory evidence of identification, which were known to me, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Helen D. Leary
(SEAL) Printed name of Notary: Helen D. Leary
My commission expires: July 11, 2019



12-4-14

Date

Ian B. Durant

STATE OF Massachusetts :

COUNTY OF Suffolk :

On this 4th day of December, 2014, before me, the undersigned notary public, personally appeared Ian Durant (name of document signer), proved to me through satisfactory evidence of identification, which were known to me, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Helen D. Leary

(SEAL)

Printed name of Notary: Helen Leary

My commission expires: July 11, 2019



By: ZOLL MEDICAL CORPORATION

12/3/14
Date

Wayne M. Demello
Signature

Wayne M. Demello
Printed Name of Signor

ZOLLIP Counsel
Title/Authority of Signor