

<b>PATENT ASSIGNMENT COVER SHEET</b>
--------------------------------------

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT5358074

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
SHANE S. VOLPE	01/05/2016
GREGORY R. FRANK	12/22/2015
THOMAS E. KAIB	01/10/2016
STEVEN J. SZYMKIEWICZ	01/05/2016
GARY A. FREEMAN	01/18/2016
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	ZOLL MEDICAL CORPORATION
<b>Street Address:</b>	269 MILL ROAD
<b>City:</b>	CHELMSFORD
<b>State/Country:</b>	MASSACHUSETTS
<b>Postal Code:</b>	01824
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
<b>Application Number:</b>	16229483
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(603)782-4378
<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>	6036228456
<b>Email:</b>	jjudkins@finchmaloney.com
<b>Correspondent Name:</b>	FINCH & MALONEY PLLC
<b>Address Line 1:</b>	50 COMMERCIAL STREET
<b>Address Line 2:</b>	SUITE 300
<b>Address Line 4:</b>	MANCHESTER, NEW HAMPSHIRE 03101
<b>ATTORNEY DOCKET NUMBER:</b>	ZL01.705USC
<b>NAME OF SUBMITTER:</b>	JOHN R. BRANCOLINI, REG. NO.57,218
<b>SIGNATURE:</b>	/John R. Brancolini/
<b>DATE SIGNED:</b>	02/04/2019
<b>Total Attachments: 6</b>	

source=ZL01-705US-ConfirmatoryAssignment-Exec#page1.tif  
source=ZL01-705US-ConfirmatoryAssignment-Exec#page2.tif  
source=ZL01-705US-ConfirmatoryAssignment-Exec#page3.tif  
source=ZL01-705US-ConfirmatoryAssignment-Exec#page4.tif  
source=ZL01-705US-ConfirmatoryAssignment-Exec#page5.tif  
source=ZL01-705US-ConfirmatoryAssignment-Exec#page6.tif

## CONFIRMATORY ASSIGNMENT

For good and valuable consideration, the sufficiency and receipt of which was and is hereby acknowledged, we, the undersigned **Shane S. Volpe of Saltsburg, PA, Gregory R. Frank of Mt. Lebanon, PA, Thomas E. Kaib of North Huntingdon, PA, Steven J. Szymkiewicz of Bethel Park, PA and Gary A. Freeman of Waltham, MA**, hereby:

confirm that we have sold, assigned and transferred to **Zoll Medical Corporation**, a Massachusetts corporation having a place of business at 269 Mill Road, Chelmsford, MA 01824-4105, 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 United States Provisional Patent Application Serial No. 62/093,975 filed on December 18, 2014 and titled PACING DEVICE WITH ACOUSTIC SENSOR, and in and to said provisional patent application and all non-provisional, 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 PCT Application No. PCT/US2015/66852, filed on December 18, 2015 and titled PACING DEVICE WITH ACOUSTIC SENSOR, and further including United States Patent Application Serial No. 14/975,149 filed December 18, 2015 and titled PACING DEVICE WITH ACOUSTIC SENSOR, 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;

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 confirmatory 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 us 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; and

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 us and that full right to convey the same as herein expressed is possessed by us.

1/5/16  
Date

Shane S. Volpe  
Shane S. Volpe

STATE/Commonwealth of PENNSYLVANIA :  
COUNTY OF ALLEGHENY :

On this 5 day of 2016 <sup>2ND</sup> ~~2015~~, before me, the undersigned notary public,  
personally appeared SHANE S. VOLPE, proved to me through satisfactory  
evidence of identification, which were PA DRIVER'S LICENSE, to be the person whose  
name is signed on the preceding or attached document, and acknowledged to me that he  
signed it voluntarily for its stated purpose.

Teresa L. Mrazik  
TERESA L. MRAZIK  
Printed Name of Notary Public

My commission expires  
03-07-2016

NOTARIAL SEAL TERESA L. MRAZIK Notary Public (SEAL) HARA TWP., ALLEGHENY COUNTY My Commission Expires Mar 7, 2016
---

12-22-2015  
Date

*Gregory R. Frank*  
Gregory R. Frank

STATE/Commonwealth of PENNSYLVANIA :  
COUNTY OF ALLEGHENY :

On this 22 day of DECEMBER, 2015, before me, the undersigned notary public, personally appeared GREGORY R. FRANK, proved to me through satisfactory evidence of identification, which were PA DRIVER'S LICENSE, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that he signed it voluntarily for its stated purpose.

NOTARIAL SEAL  
TERESA L. MRAZIK  
Notary Public  
SEABARA TWP., ALLEGHENY COUNTY  
My Commission Expires Mar 7, 2016

*Teresa L. Mrazik*

TERESA L. MRAZIK

Printed Name of Notary Public

My commission expires

03-07-16

1/10/16  
Date

Thomas E. Kaib  
Thomas E. Kaib

STATE/Commonwealth of PENNSYLVANIA:  
COUNTY OF ALLEGHENY:

On this 10 day of JANUARY, <sup>2016</sup>~~2015~~, before me, the undersigned notary public, personally appeared THOMAS E. KAIB, proved to me through satisfactory evidence of identification, which were PA DRIVER'S LICENSE, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that he signed it voluntarily for its stated purpose.

NOTARIAL SEAL TERESA L. MRAZIK Notary Public (SEAL) OHARA TWP., ALLEGHENY COUNTY My Commission Expires Mar 7, 2016	<u>Teresa L. Mrazik</u>
	<u>TERESA L. MRAZIK</u>
	Printed Name of Notary Public
	My commission expires
	<u>03-07-16</u>

01-05-2016  
Date

*Steven Szymkiewicz*  
Steven Szymkiewicz

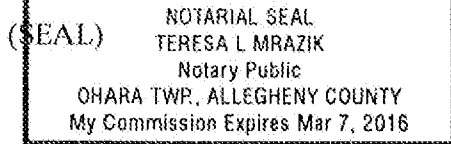
STATE/Commonwealth of PENNSYLVANIA:  
COUNTY OF ALLEGHENY:

On this 5 day of JANUARY, 2016, before me, the undersigned notary public, personally appeared STEVEN SZYMKIEWICZ, proved to me through satisfactory evidence of identification, which were PA DRIVER'S LICENSE, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that he signed it voluntarily for its stated purpose.

*Teresa L. Mrazik*

TERESA L. MRAZIK

Printed Name of Notary Public



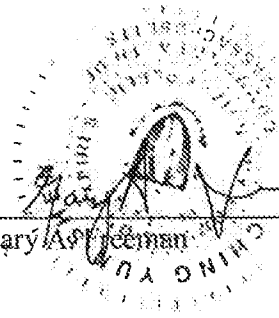
My commission expires

03-07-16

1-18-16

Date

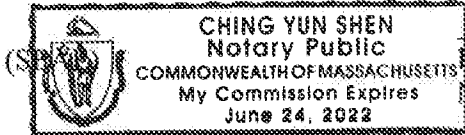
Gary A. Freeman



STATE/Commonwealth of Massachusetts  
COUNTY OF Middlesex;

On this 18th day of January, 2016, before me, the undersigned notary public, personally appeared Gary Freeman, proved to me through satisfactory evidence of identification, which were person, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that he signed it voluntarily for its stated purpose.

*[Signature]*



CHING YUN SHEN

Printed Name of Notary Public

My commission expires