

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
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EPAS ID: PAT5545708

|                                                                                                                                                                                                 |                                                |
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| <b>SUBMISSION TYPE:</b>                                                                                                                                                                         | NEW ASSIGNMENT                                 |
| <b>NATURE OF CONVEYANCE:</b>                                                                                                                                                                    | ASSIGNMENT                                     |
| <b>CONVEYING PARTY DATA</b>                                                                                                                                                                     |                                                |
| <b>Name</b>                                                                                                                                                                                     | <b>Execution Date</b>                          |
| AARON SCOTT CHAN                                                                                                                                                                                | 04/10/2017                                     |
| KENNETH J. SANCHEZ                                                                                                                                                                              | 09/19/2017                                     |
| <b>RECEIVING PARTY DATA</b>                                                                                                                                                                     |                                                |
| <b>Name:</b>                                                                                                                                                                                    | STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY |
| <b>Street Address:</b>                                                                                                                                                                          | ONE STATE FARM PLAZA                           |
| <b>City:</b>                                                                                                                                                                                    | BLOOMINGTON                                    |
| <b>State/Country:</b>                                                                                                                                                                           | ILLINOIS                                       |
| <b>Postal Code:</b>                                                                                                                                                                             | 61710                                          |
| <b>PROPERTY NUMBERS Total: 1</b>                                                                                                                                                                |                                                |
| <b>Property Type</b>                                                                                                                                                                            | <b>Number</b>                                  |
| <b>Application Number:</b>                                                                                                                                                                      | 16425560                                       |
| <b>CORRESPONDENCE DATA</b>                                                                                                                                                                      |                                                |
| <b>Fax Number:</b>                                                                                                                                                                              | (312)474-0448                                  |
| <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>                                                                                                                                                                                   | 312-474-6300                                   |
| <b>Email:</b>                                                                                                                                                                                   | docket@marshallip.com                          |
| <b>Correspondent Name:</b>                                                                                                                                                                      | MATTHEW R. CAREY                               |
| <b>Address Line 1:</b>                                                                                                                                                                          | 233 SOUTH WACKER DRIVE                         |
| <b>Address Line 2:</b>                                                                                                                                                                          | 6300 WILLIS TOWER                              |
| <b>Address Line 4:</b>                                                                                                                                                                          | CHICAGO, ILLINOIS 60606-6357                   |
| <b>ATTORNEY DOCKET NUMBER:</b>                                                                                                                                                                  | 32060/50667-CON1                               |
| <b>NAME OF SUBMITTER:</b>                                                                                                                                                                       | JACQUELIN GARCIA                               |
| <b>SIGNATURE:</b>                                                                                                                                                                               | /Jacquelin Garcia/                             |
| <b>DATE SIGNED:</b>                                                                                                                                                                             | 05/29/2019                                     |
| <b>Total Attachments: 4</b>                                                                                                                                                                     |                                                |
| source=50667-CON1 Assignment#page1.tif                                                                                                                                                          |                                                |
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ASSIGNMENT

Serial No: 15/713,227

Filed: September 22, 2017

Title: TECHNOLOGY FOR USING IMAGE DATA TO ASSESS VEHICULAR RISKS AND COMMUNICATE NOTIFICATIONS

NOW, THEREFORE, for good, valuable and legally sufficient consideration for each Assignor, the receipt of which is hereby acknowledged by all Assignors, said Assignors have sold, assigned, transferred and set over, and as demonstrated by this Assignment do sell, assign, transfer and set over unto STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY, One State Farm Plaza, Bloomington, Illinois 61710 and its successors and assigns ("Assignee"), the entire right, title and interest in and to the above-mentioned inventions, applications for Letters Patent, and any and all Letters Patent or Patents in the United States of America and all foreign countries which may be granted therefor or thereon, and in and to any and all related provisionals, nonprovisionals, divisionals, continuations and continuation-in-parts, etc. of any such application, or reissues, reexaminations, renewals and extensions of said Letters Patent or Patents; and the full right to claim for any such applications all benefits and priority rights under any applicable convention, treaty or legislation, and the right of Assignee to sue and obtain relief, including damages, profits and an injunction, for any infringement occurring before or after issuance of said Letters Patent or Patents; the same to be held and enjoyed for the sole and exclusive use and benefit of the Assignee, its successors and assigns, to the full end of the term or terms for which Letters Patent or Patents may be granted, as fully and entirely as the same would have been held and enjoyed by the Assignors had this Assignment not been made.

Each of the undersigned states that the application listed above is or was made or authorized to be made by it. Each of the undersigned authorizes the attorneys of record in the application listed above to insert in this assignment the filing date and application number of the application listed above when officially known. Each of the undersigned believes it to be the original inventor or a joint inventor with another undersigned of a claimed invention in the application listed above. The undersigned acknowledges that any willful false statement made by it in this paragraph is punishable under 18 U.S.C. §1001 by fine or imprisonment of not more than five years, or both.

Except in favor of Assignee, each of the undersigned warrants that: (i) it is the owner of all its rights, titles and interests herein assigned and has the right to make this unconditional and irrevocable assignment to Assignee without obtaining any approval or permission of a third party; and (ii) there are no outstanding encumbrances, liens, prior assignments, licenses, or other obligations or restrictions on the rights, titles and interests herein assigned. The undersigned authorized the application listed above to be made.

Upon the request of Assignee and at no expense to the undersigned, each of the undersigned hereby agrees to execute any and all applications on said inventions, including without limitation for the reissue, reexamination, supplementary protection certificate or extension thereof and any oath, declaration or affidavit relating thereto that said Assignee may deem necessary or expedient, and to cooperate to the best of the ability of the undersigned with and perform any and all affirmative acts requested by Assignee to prepare, file, prosecute, maintain, defend, enforce and vest in Assignee the rights, titles and interests assigned herein, including without limitation, preparing and executing statements and giving and producing evidence in support thereof, whereby said rights, titles and interests will be held and enjoyed by said Assignee to the full end of the term for which said patents may be granted as fully and entirely as the same would have been held and enjoyed by the undersigned if this assignment had not been made.

WITNESS Aaron Scott Chan with my hand this 10th day of April, 2018<sup>2<sup>nd</sup></sup>

State of Illinois  
County of McLean

On this 10 day of April, 2018<sup>2<sup>nd</sup></sup> before me, a Notary Public in and for the County and State aforesaid, appeared Assignor **Aaron Scott Chan**, known to me personally or proved to me on the basis of satisfactory evidence to be the same person who appeared before me, and acknowledged that they executed said instrument as their free and voluntary act and for the uses and purposes therein expressed.

WITNESS my hand and seal the same day and year last above given. My commission expires: 7/17/19



Cathy A. Hamm  
Notary Public Signature

WITNESS Kenneth J. Sanchez with my hand this \_\_\_\_\_ day of \_\_\_\_\_, 2018<sup>1</sup>

State of \_\_\_\_\_  
County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 2018<sup>1</sup> before me, a Notary Public in and for the County and State aforesaid, appeared Assignor **Kenneth J. Sanchez**, known to me personally or proved to me on the basis of satisfactory evidence to be the same person who appeared before me, and acknowledged that they executed said instrument as their free and voluntary act and for the uses and purposes therein expressed.

WITNESS my hand and seal the same day and year last above given. My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

WITNESS \_\_\_\_\_ with my hand this \_\_\_\_\_ day of \_\_\_\_\_, 2016.

**Aaron Scott Chan**

State of \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 2016, before me, a Notary Public in and for the County and State aforesaid, appeared Assignor **Aaron Scott Chan**, known to me personally or proved to me on the basis of satisfactory evidence to be the same person who appeared before me, and acknowledged that they executed said instrument as their free and voluntary act and for the uses and purposes therein expressed.

WITNESS my hand and seal the same day and year last above given. My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

WITNESS \_\_\_\_\_ with my hand this 19 day of SEPT, 2016.

**Kenneth J. Sanchez**

State of California

County of San Francisco

On this 19 day of September, <sup>2017</sup>~~2016~~, before me, a Notary Public in and for the County and State aforesaid, appeared Assignor **Kenneth J. Sanchez**, known to me personally or proved to me on the basis of satisfactory evidence to be the same person who appeared before me, and acknowledged that they executed said instrument as their free and voluntary act and for the uses and purposes therein expressed.

WITNESS my hand and seal the same day and year last above given. My commission expires: Aug 26, 2020

\_\_\_\_\_  
Notary Public Signature



On behalf of the Assignee, Mark O'Flaherty, Counsel, State Farm Mutual Automobile Insurance Company,

Name

Title

hereby confirms Assignee's acceptance of all rights, privileges, titles and interests conveyed by this assignment.

Mark O'Flaherty

9/21/17

Signature

Date