

PATENT ASSIGNMENT COVER SHEET

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 Stylesheet Version v1.2

EPAS ID: PAT5582184

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
MATTHEW WILLS	06/12/2017
ERIC POLLPETER	06/12/2017
RECEIVING PARTY DATA	
Name:	DCI MARKETING, INC. DBA DCI-ARTFORM
Street Address:	2727 WEST GOOD HOPE ROAD
City:	MILWAUKEE
State/Country:	WISCONSIN
Postal Code:	53209
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	15909452
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:	amandaw@andruslaw.com
Correspondent Name:	EMILY M. CHILSON
Address Line 1:	100 EAST WISCONSIN AVENUE
Address Line 2:	SUITE 1100
Address Line 4:	MILWAUKEE, WISCONSIN 53202
ATTORNEY DOCKET NUMBER:	6643-00005
NAME OF SUBMITTER:	EMILY M. CHILSON
SIGNATURE:	/Emily M. Chilson/
DATE SIGNED:	06/20/2019
Total Attachments: 4	
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**COMBINED DECLARATION FOR UTILITY
PATENT APPLICATION AND ASSIGNMENT THEREOF**

As a below named inventor, I hereby declare that:

The below-identified application was made or authorized to be made by me.

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

LOW PRODUCT INDICATOR FOR SELF FACING MERCHANDISER AND RELATED
METHODS

(Title of Invention)

the specification of which:

☐ is attached hereto, or

☒ was filed by an authorized person on my behalf on January 18, 2017
as United States Application Number or PCT International Application Number
15/409,193, and was amended on _____
(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 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.

I, for good and valuable consideration, receipt and sufficiency of which is hereby acknowledged, have assigned and do hereby assign and sell, which confirms any previous assignment by me or by operation of law, to DCI Marketing, Inc. dba DCI-Artform, a Wisconsin corporation, having its principal place of business at 2727 West Good Hope Road, Milwaukee, Wisconsin 53209, United States of America ("Assignee"), its successors, assigns, and legal representatives, the entire right, title, and interest, in and to all subject matter and improvements invented, made, or conceived by me and described in the application for patent identified above and in and to all patent and all patent convention and treaty rights of all kinds, including the right to claim priority

from said application, and all rights in and to any utility model, continuation, continuation-in-part, and divisional application therefrom, and any reissue or re-examination as to any patent issuing therefrom, in all countries throughout the world, for all such subject matter described therein, including all rights of action and rights to recover damages for past infringements.

I agree that on request and without further consideration, I will communicate to the Assignee 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 Assignee, its successors, assigns, and nominees to obtain and enforce proper patent protection for the invention and its improvements in all countries.

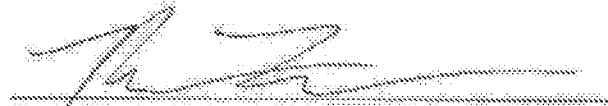
I hereby declare that all statements made herein of my own knowledge are true, and that all statements made herein on information and belief are believed to be true.

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.

Legal Name of Inventor:
(Green names first, with Family name last)

Matthew Wills

Inventor's Signature:



Date:

6/12/17

Inventor's Address:

1060 12th Avenue
Grafton, Wisconsin, 53024
United States of America

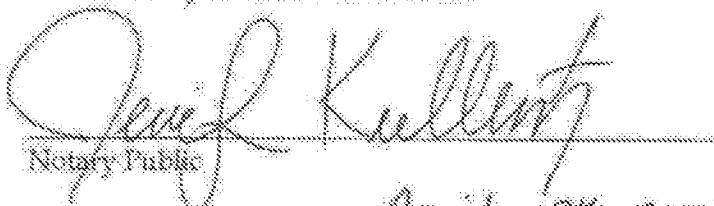
State of Wisconsin

County of Milwaukee

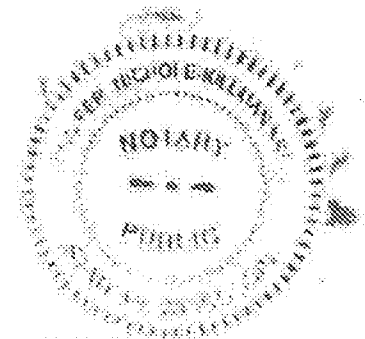
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On June 12th, 2017, before me, Jennifer Krellwitz, a Notary Public in and for said State, personally appeared MATTHEW WILLS, personally known by me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.


Notary Public

My Commission Expires: April 13th 2021



Legal Name of Inventor:

(Given names first, with family name last)

Eric Pollpeter

Inventor's Signature:

Eric Pollpeter

Date:

6/12/17

Inventor's Address:

1393 Fiesta Court
Cedarburg, Wisconsin, 53012
United States of America

State of Wisconsin

County of Milwaukee

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) ss
)

On June 12th, 2017 before me, Jennifer Krellwartz, a Notary Public in and for said State, personally appeared ERIC POLLPETER, personally known by me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Jennifer Krellwartz
Notary Public
My Commission Expires April 13th, 2021

