

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5737326

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
ULRIKA PERSSON	08/29/2016
PIA KALENTUN	09/01/2016
IDA JENSEN	09/07/2016
RECEIVING PARTY DATA	
Name:	ESSITY HYGIENE AND HEALTH AKTIEBOLAG
Street Address:	INTELLECTUAL PROPERTY DEPARTMENT
City:	GÖTEBORG
State/Country:	SWEDEN
Postal Code:	405 03
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16321725
CORRESPONDENCE DATA	
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<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>	
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ATTORNEY DOCKET NUMBER:	ESSTY-103US
NAME OF SUBMITTER:	MICHAEL P.F. PHELPS
SIGNATURE:	/Michael P.F. Phelps/
DATE SIGNED:	09/25/2019
Total Attachments: 4	
source=Assignment#page1.tif	
source=Assignment#page2.tif	
source=Assignment#page3.tif	



ASSIGNMENT

I hereby declare, that I have assigned to

SCA Hygiene Products AB
S-405 03 GÖTEBORG
Sweden

my right to patents, in all countries, on an invention made by:

Ulrika Persson
Pia Kalentun
Ida Jensen

entitled: ABSORBENT ARTICLE WITH BREATHABLE BACKSHEET

filed as a **PCT application** on 24 August 2016

with the Application No. PCT/SE2016/050793

The assignment of the above mentioned right to an invention includes a transfer of the patent rights in all countries, as well as the right to use a convention priority of the above mentioned patent application in all countries.

The ASSIGNEE alone hereinafter has the entire disposal of the invention and possesses entire ownership to any domestic and foreign patents granted thereafter.

The ASSIGNOR undertakes to sign all documents necessary for taking out a patent and, moreover, all such documents, which may be required to assert the rights transferred hereby.

If the ASSIGNOR is prevented by any obstacles from signing said documents in person, this document of assignment shall be valid as a Power of Attorney for the ASSIGNEE to sign these documents on behalf of the ASSIGNOR or, in the event of the death of the latter, the estate thereof.

Mölnadal 160829

Place and date

A handwritten signature in dark ink, appearing to read "Ulrika Persson".

Signature of the Assignor

Ulrika Persson

Clarification of the signature

A handwritten signature in dark ink, appearing to read "Inge Gabriell".

Signature of witness

Inge GABRIELL

Clarification of witness' signature



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MÖLNDAL 1/9-2016
Place and date


Signature of the Assignor

Pia Kalentun
Clarification of the signature


Signature of witness

MARIE KRISTENSSON
Clarification of witness' signature



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Mölnådal 160907
Place and date

Ida Jensen
Signature of the Assignor

Ida Jensen
Clarification of the signature

Anders Holmberg
Signature of witness

Anders Holmberg
Clarification of witness' signature

From the INTERNATIONAL BUREAU

PCTNOTIFICATION OF THE RECORDING
OF A CHANGE(PCT Rule 92bis.1 and
Administrative Instructions, Section 422)

To:

NLO
New Babylon City Offices
Anna van Buerenplein 21a
2595 DA The Hague
PAYS-BAS

Date of mailing (day/month/year) 18 July 2018 (18.07.2018)	
Applicant's or agent's file reference P6075047PCT	IMPORTANT NOTIFICATION
International application No. PCT/SE2016/050793	International filing date (day/month/year) 24 August 2016 (24.08.2016)

1. The following indications appeared on record concerning:				
<input checked="" type="checkbox"/> the applicant	<input type="checkbox"/> the inventor	<input type="checkbox"/> the agent	<input type="checkbox"/> the common representative	
Name and Address SCA HYGIENE PRODUCTS AB 405 03 Göteborg Sweden		State of Nationality SE	State of Residence SE	
		Telephone No.		
		Facsimile No.		
		E-mail address		
2. The International Bureau hereby notifies the applicant that the following change has been recorded concerning:				
<input type="checkbox"/> the person	<input checked="" type="checkbox"/> the name	<input type="checkbox"/> the address	<input type="checkbox"/> the nationality	<input type="checkbox"/> the residence
Name and Address ESSITY HYGIENE AND HEALTH AKTIEBOLAG 405 03 Göteborg Sweden		State of Nationality SE	State of Residence SE	
		Telephone No.		
		Facsimile No.		
		E-mail address <input type="checkbox"/> Notifications by e-mail authorized		
3. Further observations, if necessary:				
4. A copy of this notification has been sent to:				
<input checked="" type="checkbox"/> the receiving Office	<input checked="" type="checkbox"/> the International Preliminary Examining Authority			
<input type="checkbox"/> the International Searching Authority	<input type="checkbox"/> the designated Offices concerned			
<input type="checkbox"/> the Authority(ies) specified for supplementary search	<input checked="" type="checkbox"/> the elected Offices concerned			
	<input type="checkbox"/> other:			

The International Bureau of WIPO 34, chemin des Colombettes 1211 Geneva 20, Switzerland	Authorized officer Blanc Veronique e-mail pct.team5@wipo.int Telephone No. +41 22 338 74 05
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