

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT6015115

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
DAVE BERRY	10/11/2016
BARRY L. TUCKER	10/13/2016
EDWARD J. RHINEHART	10/19/2016
GERALD W. CALLAN	10/14/2016
ARTHUR E. UBER III	10/27/2016
KEVIN P. COWAN	10/14/2016
RAYMOND C. HOFFMAN	10/25/2016
BENJAMIN T. KRUPP	10/20/2016
MARTIN J. GIBLER	10/14/2016
MICHAEL A. SPOHN	10/14/2016
RECEIVING PARTY DATA	
Name:	BAYER HEALTHCARE LLC
Street Address:	100 BAYER BOULEVARD
City:	WHIPPANY
State/Country:	NEW JERSEY
Postal Code:	07981
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16812912
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>	
Phone:	7245960281
Email:	susan.vresh@bayer.com
Correspondent Name:	BAYER HEALTHCARE LLC
Address Line 1:	1 BAYER DRIVE
Address Line 4:	INDIANOLA, PENNSYLVANIA 15051
ATTORNEY DOCKET NUMBER:	CT/14-011 PCT-US N

NAME OF SUBMITTER:	JOSEPH L. KENT, REG. NO. 54216
SIGNATURE:	/JOSEPH L. KENT/
DATE SIGNED:	03/16/2020
Total Attachments: 16 source=FullyExecutedAssignwithDec1#page1.tif source=FullyExecutedAssignwithDec1#page2.tif source=FullyExecutedAssignwithDec1#page3.tif source=FullyExecutedAssignwithDec1#page4.tif source=FullyExecutedAssignwithDec1#page5.tif source=FullyExecutedAssignwithDec1#page6.tif source=FullyExecutedAssignwithDec1#page7.tif source=FullyExecutedAssignwithDec1#page8.tif source=FullyExecutedAssignwithDec1#page9.tif source=FullyExecutedAssignwithDec1#page10.tif source=FullyExecutedAssignwithDec1#page11.tif source=FullyExecutedAssignwithDec1#page12.tif source=FullyExecutedAssignwithDec1#page13.tif source=FullyExecutedAssignwithDec1#page14.tif source=FullyExecutedAssignwithDec1#page15.tif source=FullyExecutedAssignwithDec1#page16.tif	

ASSIGNMENT WITH DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Whereas, I/We, the undersigned inventor(s) hereinafter called assignor(s), have invented certain improvements described in the application identified below; and

Whereas, **Bayer HealthCare LLC** a corporation organized and existing under the laws of the State of Delaware and having a place of business at 100 Bayer Boulevard, Whippany, NJ 07981, (assignee), desires to acquire the entire right, title, and interest in the application and invention, and to any United States patents to be obtained therefor;

Now therefore, for valuable consideration, receipt whereof is hereby acknowledged,

I/We, the above named assignor(s), hereby sell, assign and transfer to the above named assignee, its successors, legal representatives, and assigns, the entire right, title and interest in the invention and the application for the United States of America, including all direct and indirect divisions, continuations, and continuations-in-part thereof, and all original, extended, reissued, reviewed, and reexamined Letters Patent of the United States, and all countries foreign thereto, that may be granted thereon, including rights of priority under the International Convention of Paris (1883) as amended, including the right to claim priority under 35 U.S.C. §119, and I/we request the Director of the U.S. Patent and Trademark Office to issue any Letters Patent granted upon the invention set forth in the application to the assignee, its successors and assigns; and I/we hereby agree that the assignee may apply for foreign Letters Patent on the invention and I/we will execute without further consideration all papers deemed necessary by the assignee in connection with the United States and foreign applications when called upon to do so by the assignee, its successors, legal representatives, or assigns. I/We further represent and warrant that I/We have the full right to convey the interest assigned by this assignment, and that I/We have not granted any rights inconsistent with the rights granted herein. I/We further acknowledge an obligation of assignment of this invention to assignee at the time the invention was made and we further irrevocably designate and appoint assignee and its counsel as my/our attorney-in-fact and agent to act for and on my/our behalf to execute and file any document and to do all other lawfully permitted acts to further the purposes of this Agreement with the same legal force and effect as if executed by assignor himself/herself. I/We acknowledge that assignee is the real party in interest to any and all patent applications described in connection with this Agreement, and to any and all patent rights granted thereon.

As the below named inventor I hereby declare that:

This Assignment with Declaration is directed to: The attached application, or
 United States Application or PCT International Application
Number _____ filed on _____ (Confirmation No. _____).

The application is entitled: **Syringe with Rolling Diaphragm**

The above identified application was made or was 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.

I have reviewed and understand the contents of the application and I am aware of the duty to disclose to the Office all information known to me to be material to patentability as defined in 37 CFR 1.56.

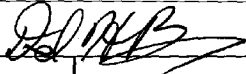
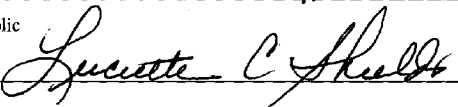
I hereby acknowledge that any willful false statement made in this Assignment with Declaration is punishable under 18 USC 1001 by fine or imprisonment of not more than five (5) years, or both.

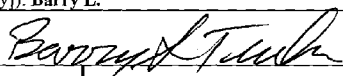
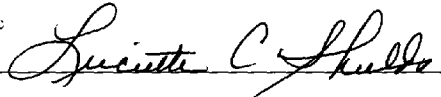
Authorization To Permit Access To Application by Participating Office

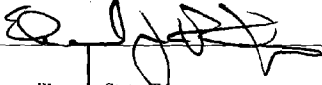
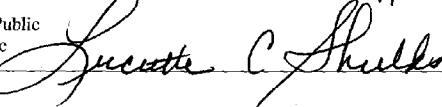
If checked, the undersigned hereby grants the USPTO authority to provide the European Patent Office (EPO), the Japan Patent Office (JPO), the Korean Intellectual Property Office (KIPO), the World Intellectual Property Office (WIPO), and any other intellectual property offices in which a foreign application claiming priority to the above-identified application is filed access to the above-identified patent application. See 37 CFR 1.14(c) and (h). This box should not be checked if the applicant does not wish the EPO, JPO, KIPO, or other intellectual property office in which a foreign application claiming priority to the above-identified application is filed to have access to the application.

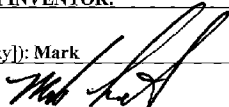
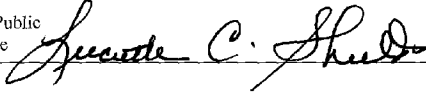
In accordance with 37 CFR 1.14(h)(3), access will be provided to a copy of the application-as-filed with respect to: 1) the above-identified patent application-as-filed, 2) any foreign application to which the above-identified application claims priority under 35 USC 119(a)-(d) if a copy of the foreign application that satisfies the certified copy requirement of 37 CFR 1.55 has been filed in the above-identified patent application, and 3) any U.S. application-as-filed from which benefit is sought in the above-identified patent application.

In accordance with 37 CFR 1.14(c), access may be provided to information concerning the date of filing the Authorization to Permit Access to Application by Participating Office.

NAME OF SOLE OR FIRST INVENTOR:			
Given Name (first and middle [if any]): Dave		Family Name or Surname: Berry	
Inventor's signature 		Date Oct. 11, 2016	
Residence: City: Kittanning	State: PA	Country: U.S.	Citizenship: U.S.
Mailing Address: 277 Ping Wing Hollow Road, Kittanning, PA 16201 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Dave Berry , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 11th day of Oct. , 20 16			
Notary Public Signature 		Notary Public Printed Name: Luciette C. Shields	
[seal]		[stamp]	
<div style="border: 1px solid black; padding: 5px; text-align: center;"> COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Luciette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018 <small>MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES</small> </div>			

NAME OF SECOND INVENTOR:			
Given Name (first and middle [if any]): Barry L.		Family Name or Surname: Tucker	
Inventor's signature 		Date 10-13-16	
Residence: City: Verona	State: PA	Country: U.S.	Citizenship: USA
Mailing Address: 219 McGregor Drive, Verona, PA 15147 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Barry L. Tucker , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 13th day of Oct. , 20 16			
Notary Public Signature 		Notary Public Printed Name: Luciette C. Shields	
[seal]		[stamp]	
<div style="border: 1px solid black; padding: 5px; text-align: center;"> COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Luciette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018 <small>MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES</small> </div>			

NAME OF THIRD INVENTOR:			
Given Name (first and middle [if any]): Edward J.		Family Name or Surname: Rhinehart	
Inventor's signature 		Date 10-19-2016	
Residence: City: Monroeville	State: PA	Country: U.S.	Citizenship USA.
Mailing Address: 1780 McClure Road, Monroeville, PA 15146 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Edward J. Rhinehart, known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 19 th day of Oct., 2016			
Notary Public Signature 		Notary Public Printed Name: Lucelette C. Shields	
[seal]		[stamp] COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Lucelette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES	

NAME OF FOURTH INVENTOR:			
Given Name (first and middle [if any]): Mark		Family Name or Surname: Trocki	
Inventor's signature 		Date OCT. 11. 16	
Residence: City: Cheswick	State: PA	Country: U.S.	Citizenship USA.
Mailing Address: 130 Reaghard Drive, Cheswick, PA 15024 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Mark Trocki, known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 11 th day of Oct., 2016			
Notary Public Signature 		Notary Public Printed Name: Lucelette C. Shields	
[seal]		[stamp] COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Lucelette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES	

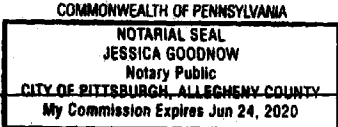
NAME OF FIFTH INVENTOR:			
Given Name (first and middle [if any]): Gerald W.		Family Name or Surname: Callan	
Inventor's signature <i>Gerald W. Callan</i>		Date 10/14/2016	
Residence: City: Cranberry Twp.	State: PA	Country: U.S.	Citizenship USA
Mailing Address: 108 Hunter Drive, Cranberry Twp., PA 16066 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Gerald W. Callan , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 14th day of Oct. , 2016			
Notary Public Signature <i>Luciette C. Shields</i>		Notary Public Printed Name: Luciette C. Shields	
[seal]		[stamp]	COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Luciette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

NAME OF SIXTH INVENTOR:			
Given Name (first and middle [if any]): Arthur E.		Family Name or Surname: Uber, III	
Inventor's signature <i>Arthur E. Uber, III</i>		Date Oct 27, 2016	
Residence: City: Pittsburgh	State: PA	Country: U.S.	Citizenship USA
Mailing Address: 7426 Ben Hur Street, Pittsburgh, PA 15208 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Arthur E. Uber, III , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 27th day of Oct. , 2016			
Notary Public Signature <i>Luciette C. Shields</i>		Notary Public Printed Name: Luciette C. Shields	
[seal]		[stamp]	COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Luciette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

NAME OF SEVENTH INVENTOR:			
Given Name (first and middle [if any]): Martin J.		Family Name or Surname: Uram	
Inventor's signature			Date
Residence: City: Pittsburgh	State: PA	Country: U.S.	Citizenship
Mailing Address: 924 Irwin Drive, Pittsburgh, PA 15236 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Martin J. Uram , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	


NAME OF EIGHTH INVENTOR:			
Given Name (first and middle [if any]): Dave		Family Name or Surname: Callen	
Inventor's signature <i>Dave R. Callen</i>			Date 10/18/16
Residence: City: Pittsburgh	State: PA	Country: U.S.	Citizenship U.S.
Mailing Address: 475 Irwin Lane, Pittsburgh, PA 15212 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Dave Callen , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 18th day of Oct. , 20 16 .			
Notary Public Signature <i>Luciette C. Shields</i>		Notary Public Printed Name: Luciette C. Shields	
[seal]		[stamp] COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Luciette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018 <small>MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES</small>	

NAME OF NINTH INVENTOR:			
Given Name (first and middle [if any]): Kevin P.		Family Name or Surname: Cowan	
Inventor's signature			Date
Residence: City: Allison Park	State: PA	Country: U.S.	Citizenship
Mailing Address: 4242 Estates Court, Allison Park, PA 15101 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Kevin P. Cowan , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF TENTH INVENTOR:			
Given Name (first and middle [if any]): Raymond C.		Family Name or Surname: Hoffman	
Inventor's signature <i>Raymond C. Hoffman</i>			Date <i>10/25/16</i>
Residence: City: Gibsonia	State: PA	Country: U.S.	Citizenship <i>US Citizen</i>
Mailing Address: 204 MacDuff Court, Gibsonia, PA 15044 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Raymond C. Hoffman , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this <i>25th</i> day of <i>October</i> , 20 <i>16</i> .			
Notary Public Signature <i>Jessica Goodnow</i>		Notary Public Printed Name: <i>Jessica Goodnow</i>	
[seal]		[stamp]	
			

NAME OF ELEVENTH INVENTOR:			
Given Name (first and middle [if any]): Matthew		Family Name or Surname: McGee	
Inventor's signature		Date	
Residence: City: Cranberry Twp.	State: PA	Country: U.S.	Citizenship
Mailing Address: 210 Drake Circle, Cranberry Twp., PA 16066 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Matthew McGee , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF TWELFTH INVENTOR:			
Given Name (first and middle [if any]): Michael A.		Family Name or Surname: Spohn	
Inventor's signature <i>Michael A. Spohn</i>		Date 10/14/16	
Residence: City: Fenelton	State: PA	Country: U.S.	Citizenship USA
Mailing Address: 2814 Old Route 422 East, Fenelton, PA 16034 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Michael A. Spohn , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 14th day of Oct. , 20 16 .			
Notary Public Signature <i>Luciette C. Shields</i>		Notary Public Printed Name: Luciette C. Shields	
[seal]		[stamp]	
COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Luciette C. Shields, Notary Public Indiana Twp., Allegheny County My Commission Expires June 10, 2018			
<small>MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES</small>			

NAME OF THIRTEENTH INVENTOR:			
Given Name (first and middle [if any]): Benjamin T.		Family Name or Surname: Krupp	
Inventor's signature <i>Benjamin T Krupp</i>		Date <i>10/20/2016</i>	
Residence: City: Cincinnati	State: OH	Country: U.S.	Citizenship <i>U.S.</i>
Mailing Address: 114 Congress Run Road, Cincinnati, OH 45215 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Benjamin T. Krupp , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this <i>20</i> day of <i>October</i> , 20 <i>06</i>			
Notary Public Signature <i>Mary Gentry</i>		Notary Public Printed Name: <i>Mary Gentry</i>	
 MARY GENTRY Notary Public In and for the State of Ohio My Commission Expires November 12, 2017		[stamp]	

NAME OF FOURTEENTH INVENTOR:			
Given Name (first and middle [if any]): Martin J.		Family Name or Surname: Gibler	
Inventor's signature		Date	
Residence: City: West Chester	State: OH	Country: U.S.	Citizenship
Mailing Address: 5854 Old Forest Lane, West Chester, OH 45069 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Martin J. Gibler , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

ASSIGNMENT WITH DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Whereas, I/We, the undersigned inventor(s) hereinafter called assignor(s), have invented certain improvements described in the application identified below; and

Whereas, **Bayer HealthCare LLC** a corporation organized and existing under the laws of the State of Delaware and having a place of business at 100 Bayer Boulevard, Whippany, NJ 07981, (assignee), desires to acquire the entire right, title, and interest in the application and invention, and to any United States patents to be obtained therefor;

Now therefore, for valuable consideration, receipt whereof is hereby acknowledged.

I/We, the above named assignor(s), hereby sell, assign and transfer to the above named assignee, its successors, legal representatives, and assigns, the entire right, title and interest in the invention and the application for the United States of America, including all direct and indirect divisions, continuations, and continuations-in-part thereof, and all original, extended, reissued, reviewed, and reexamined Letters Patent of the United States, and all countries foreign thereto, that may be granted thereon, including rights of priority under the International Convention of Paris (1883) as amended, including the right to claim priority under 35 U.S.C. §119, and I/we request the Director of the U.S. Patent and Trademark Office to issue any Letters Patent granted upon the invention set forth in the application to the assignee, its successors and assigns; and I/we hereby agree that the assignee may apply for foreign Letters Patent on the invention and I/we will execute without further consideration all papers deemed necessary by the assignee in connection with the United States and foreign applications when called upon to do so by the assignee, its successors, legal representatives, or assigns. I/We further represent and warrant that I/We have the full right to convey the interest assigned by this assignment, and that I/We have not granted any rights inconsistent with the rights granted herein. I/We further acknowledge an obligation of assignment of this invention to assignee at the time the invention was made and we further irrevocably designate and appoint assignee and its counsel as my/our attorney-in-fact and agent to act for and on my/our behalf to execute and file any document and to do all other lawfully permitted acts to further the purposes of this Agreement with the same legal force and effect as if executed by assignor himself/herself. I/We acknowledge that assignee is the real party in interest to any and all patent applications described in connection with this Agreement, and to any and all patent rights granted thereon.

As the below named inventor I hereby declare that:

This Assignment with Declaration is directed to: The attached application, or
 United States Application or PCT International Application
Number _____ filed on _____ (Confirmation No. _____).

The application is entitled: **Syringe with Rolling Diaphragm**

The above identified application was made or was 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.

I have reviewed and understand the contents of the application and I am aware of the duty to disclose to the Office all information known to me to be material to patentability as defined in 37 CFR 1.56.

I hereby acknowledge that any willful false statement made in this Assignment with Declaration is punishable under 18 USC 1001 by fine or imprisonment of not more than five (5) years, or both.

Authorization To Permit Access To Application by Participating Office

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In accordance with 37 CFR 1.14(c), access may be provided to information concerning the date of filing the Authorization to Permit Access to Application by Participating Office.

NAME OF SOLE OR FIRST INVENTOR:			
Given Name (first and middle [if any]): Dave		Family Name or Surname: Berry	
Inventor's signature			Date
Residence: City: Kittanning	State: PA	Country: U.S.	Citizenship
Mailing Address: 277 Ping Wing Hollow Road, Kittanning, PA 16201 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Dave Berry , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this day of , 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

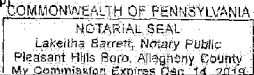
NAME OF SECOND INVENTOR:			
Given Name (first and middle [if any]): Barry L.		Family Name or Surname: Tucker	
Inventor's signature			Date
Residence: City: Verona	State: PA	Country: U.S.	Citizenship
Mailing Address: 219 McGregor Drive, Verona, PA 15147 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Barry L. Tucker , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this day of , 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF THIRD INVENTOR:			
Given Name (first and middle [if any]): Edward J.		Family Name or Surname: Rhinehart	
Inventor's signature			Date
Residence: City: Monroeville	State: PA	Country: U.S.	Citizenship
Mailing Address: 1780 McClure Road, Monroeville, PA 15146 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Edward J. Rhinehart , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF FOURTH INVENTOR:			
Given Name (first and middle [if any]): Mark		Family Name or Surname: Trocki	
Inventor's signature			Date
Residence: City: Cheswick	State: PA	Country: U.S.	Citizenship
Mailing Address: 130 Reaghard Drive, Cheswick, PA 15024 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Mark Trocki , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF FIFTH INVENTOR:			
Given Name (first and middle [if any]): Gerald W.		Family Name or Surname: Callan	
Inventor's signature			Date
Residence: City: Cranberry Twp.	State: PA	Country: U.S.	Citizenship
Mailing Address: 108 Hunter Drive, Cranberry Twp., PA 16066 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Gerald W. Callan , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	


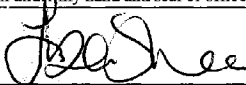

NAME OF SIXTH INVENTOR:			
Given Name (first and middle [if any]): Arthur E.		Family Name or Surname: Uber, III	
Inventor's signature			Date
Residence: City: Pittsburgh	State: PA	Country: U.S.	Citizenship
Mailing Address: 7426 Ben Hur Street, Pittsburgh, PA 15208 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Arthur E. Uber, III , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF SEVENTH INVENTOR:			
Given Name (first and middle [if any]): <u>Martin J.</u>		Family Name or Surname: <u>Uram</u>	
Inventor's signature <u>Martin J. Uram</u>		Date <u>10/15/2016</u>	
Residence: City: <u>Pittsburgh</u>	State: <u>PA</u>	Country: <u>U.S.</u>	Citizenship: <u>USA</u>
Mailing Address: <u>924 Irwin Drive, Pittsburgh, PA 15236 U.S.</u>			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared <u>Martin J. Uram</u> , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this <u>15</u> day of <u>October</u> , 20 <u>16</u> .			
Notary Public Signature <u>Lakeitha Barrett</u>		Notary Public Printed Name: <u>Lakeitha Barrett</u>	
[seal]		[stamp]	
			

NAME OF EIGHTH INVENTOR:			
Given Name (first and middle [if any]): <u>Dave</u>		Family Name or Surname: <u>Callen</u>	
Inventor's signature		Date	
Residence: City: <u>Pittsburgh</u>	State: <u>PA</u>	Country: <u>U.S.</u>	Citizenship
Mailing Address: <u>475 Irwin Lane, Pittsburgh, PA 15212 U.S.</u>			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared <u>Dave Callen</u> , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF NINTH INVENTOR:			
Given Name (first and middle [if any]): Kevin P.		Family Name or Surname: Cowan	
Inventor's signature <i>Kevin P. Cowan</i>		Date 14 OCT 2016	
Residence: City: Allison Park	State: PA	Country: U.S.	Citizenship: USA
Mailing Address: 4242 Estates Court, Allison Park, PA 15101 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Kevin P. Cowan , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 14th day of Oct , 20 16			
Notary Public Signature <i>Lucette C. Shields</i>		Notary Public Printed Name: Lucette C. Shields	
[seal]		[stamp]	

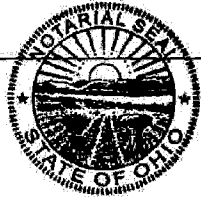
NAME OF TENTH INVENTOR:			
Given Name (first and middle [if any]): Raymond C.		Family Name or Surname: Hoffman	
Inventor's signature		Date	
Residence: City: Gibsonia	State: PA	Country: U.S.	Citizenship
Mailing Address: 204 MacDuff Court, Gibsonia, PA 15044 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Raymond C. Hoffman , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20____			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF ELEVENTH INVENTOR:			
Given Name (first and middle [if any]): Matthew		Family Name or Surname: McGee	
Inventor's signature 		Date 10-11-16	
Residence: City: Cranberry Twp.	State: PA	Country: U.S.	Citizenship
Mailing Address: 210 Drake Circle, Cranberry Twp., PA 16066 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Matthew McGee , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this 11 day of October , 20 16 .			
Notary Public Signature 		Notary Public Printed Name: Lisa Shea	
[seal]		[stamp] 	

NAME OF TWELFTH INVENTOR:			
Given Name (first and middle [if any]): Michael A.		Family Name or Surname: Spohn	
Inventor's signature		Date	
Residence: City: Fenelton	State: PA	Country: U.S.	Citizenship
Mailing Address: 2814 Old Route 422 East, Fenelton, PA 16034 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Michael A. Spohn , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20____.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF THIRTEENTH INVENTOR:			
Given Name (first and middle [if any]): Benjamin T.		Family Name or Surname: Krupp	
Inventor's signature			Date
Residence: City: Cincinnati	State: OH	Country: U.S.	Citizenship
Mailing Address: 114 Congress Run Road, Cincinnati, OH 45215 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Benjamin T. Krupp , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature		Notary Public Printed Name:	
[seal]		[stamp]	

NAME OF FOURTEENTH INVENTOR:			
Given Name (first and middle [if any]): Martin J.		Family Name or Surname: Gibler	
Inventor's signature <i>Martin J. Gibler</i>			Date 10-14-16
Residence: City: West Chester	State: OH	Country: U.S.	Citizenship U.S.
Mailing Address: 5854 Old Forest Lane, West Chester, OH 45069 U.S.			
NOTARIZATION			
BEFORE ME, the undersigned authority, on this day personally appeared Martin J. Gibler , known to me to be the person whose name is subscribed above, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed. Given under my hand and seal of office, this _____ day of _____, 20__.			
Notary Public Signature <i>Sharrille L. Mills</i>		Notary Public Printed Name: SHARRILLE L. MILLS	
[seal]		[stamp]	



Sharrille L. Mills
 Notary Public, State of Ohio
 My Commission Expires 09-17-2019