

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT6077456

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
MARK W. EMORY	01/13/2017
FRANCIS PYKA	01/13/2017
MICHAEL F. TURK	01/13/2017
SAMIR SHAH	01/13/2017
JAMES R. PARKS	01/13/2017
RICHARD T. FOSTER	01/13/2017
RECEIVING PARTY DATA	
Name:	RAIN BIRD CORPORATION
Street Address:	970 WEST SIERRA MADRE AVENUE
City:	AZUSA
State/Country:	CALIFORNIA
Postal Code:	91702
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16857792
CORRESPONDENCE DATA	
Fax Number:	(312)577-7007
<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:	312-577-7000
Email:	asmith@fitcheven.com
Correspondent Name:	FITCH EVEN TABIN & FLANNERY, LLP
Address Line 1:	120 SOUTH LASALLE STREET
Address Line 2:	SUITE 2100
Address Line 4:	CHICAGO, ILLINOIS 60603-3406
ATTORNEY DOCKET NUMBER:	8473-149121-US
NAME OF SUBMITTER:	RUDY I. KRATZ
SIGNATURE:	/Rudy I. Kratz/
DATE SIGNED:	04/24/2020

Total Attachments: 13

source=139983-WO_EMORY_PCTUS2016061564_Assignment#page1.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page2.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page3.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page4.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page5.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page6.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page7.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page8.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page9.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page10.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page11.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page12.tif
source=139983-WO_EMORY_PCTUS2016061564_Assignment#page13.tif

ASSIGNMENT

I, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign and sell, which confirms any previous assignment by me, by operation of law, or by my employment obligations, to RAIN BIRD CORPORATION, a California corporation, having its principal place of business at 970 West Sierra Madre Avenue, Azusa, California, 91702, 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 entitled

MOISTURE SENSING VALVES AND DEVICES

having International Application Number PCT/US2016/061564, filed November 11, 2016, 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, and any rights from post-grant proceedings, 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.

Legal Name of Inventor: Mark W. Emory
(Given names first, with Family name last)

Inventor's Signature: [Handwritten Signature]

Date: 1/13/17

Inventor's Address: 2910 Maple Avenue
Fullerton, California, 92835
United States of America

State of _____)
County of _____) ss

On _____, before me, _____, a Notary Public in and for said State, personally appeared MARK W. EMORY, personally known by me (and 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.

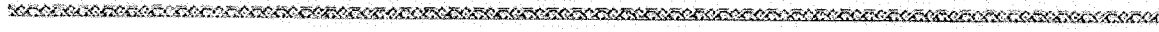
[Handwritten Signature]
[Handwritten Signature]
1/20/17

Notary Public _____

My Commission Expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189



A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of LOS ANGELES)

On JANUARY 20 2017 before me, MITCHELL W WOLF, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer

personally appeared MARK W EMORY
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Mitchell W. Wolf
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Legal Name of Inventor: Francis Pyka
(Given names first, with Family name last)

Inventor's Signature:

[Handwritten Signature]

Date:

1-13-17

Inventor's Address:

950 West Sierra Madre Avenue, Apartment 405
Azusa, California, 91702
United States of America

State of _____)
County of _____) ss

On _____, before me, _____,
a Notary Public in and for said State, personally appeared FRANCIS PYKA, personally known by
me (and 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.

[Handwritten Signature]
1/20/17

Notary Public

My Commission Expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of LOS ANGELES)

On JANUARY 20, 2017 before me, MITCHELL W. WOLF, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer

personally appeared FRANLIS PYKA
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person~~s~~ whose name~~s~~ ~~is~~ are subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~s~~ on the instrument the person~~s~~, or the entity upon behalf of which the person~~s~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Mitchell W. Wolf
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

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

Michael F. Turk

Inventor's Signature:

[Handwritten Signature]

Date:

1/13/17

Inventor's Address:

10811 Baird Avenue
Porter Ranch, California, 91326
United States of America

State of _____)

County of _____)

ss

On _____, before me, _____,
a Notary Public in and for said State, personally appeared MICHAEL F. TURK, personally known
by me (and 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.

[Handwritten Notary Seal and Signature]
1/20/17

Notary Public

My Commission Expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189



A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of LOS ANGELES)
On JANUARY 29 2017 before me, MITCHELL W WOLF, NOTARY PUBLIC,
Date Here Insert Name and Title of the Officer
personally appeared MICHAEL F TURK
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person~~(s)~~ whose name~~(s)~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~(s)~~ on the instrument the person~~(s)~~, or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Mitchell W. Wolf
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Legal Name of Inventor: Samir Shah
(Given names first, with Family name last)

Inventor's Signature:

Samir Shah

Date:

11/13/17

Inventor's Address:

3954 Coast Oak Circle
Chino Hills, California, 91709
United States of America

State of _____)
County of _____) ss

On _____, before me, _____
a Notary Public in and for said State, personally appeared SAMIR SHAH, personally known by
me (and 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
Michelle Wray
1/20/17

Notary Public

My Commission Expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of LOS ANGELES)

On JANUARY 20, 2017 before me, MITCHELL W WOLF, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer

personally appeared SAMIR SHAH
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Mitchell W Wolf
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

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

James R. Parks

Inventor's Signature:

[Handwritten Signature]

Date:

Jan 13, 2017

Inventor's Address:

26550 Loop Avenue
Santa Clarita, California, 91387
United States of America

State of _____)

County of _____)

ss

On _____, before me, _____
a Notary Public in and for said State, personally appeared JAMES R. PARKS, personally known
by me (and 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

[Handwritten Signature]
1/20/17

Notary Public

My Commission Expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of LOS ANGELES)

On JANUARY 24 2017 before me, MITCHELL W WOLF, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer

personally appeared JAMES R PARKS
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Mitchell W Wolf
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

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

Richard T. Foster

Inventor's Signature:

[Handwritten Signature]

Date:

01/13/17

Inventor's Address:

415 Walker Road
San Dimas, California, 91773
United States of America

State of _____)

County of _____)

ss

On _____, before me, _____,
a Notary Public in and for said State, personally appeared RICHARD T. FOSTER, personally
known by me (and 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

[Handwritten Signature]
1/20/17

Notary Public

My Commission Expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of LOS ANGELES)
On JANUARY 20, 2017 before me, MITCHELL W WOLF, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer
personally appeared RICHARD T FOSTER
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person~~s~~ whose name~~s~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she~~~~they~~ executed the same in his/~~her~~~~their~~ authorized capacity~~(ies)~~, and that by his/~~her~~~~their~~ signature~~s~~ on the instrument the person~~s~~; or the entity upon behalf of which the person~~s~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Mitchell W Wolf
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____