

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT6381854

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
ALAN J. KREBS	01/25/2018
CHI KEUNG LI	01/24/2018
JING YANG	01/30/2018
MING LUO	02/02/2018
RECEIVING PARTY DATA	
Name:	BISSELL HOMECARE, INC.
Street Address:	2345 WALKER AVENUE, N.W.
City:	GRAND RAPIDS
State/Country:	MICHIGAN
Postal Code:	49544-2516
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	17062899
CORRESPONDENCE DATA	
Fax Number:	(616)742-1010
<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:	6167423500
Email:	patents@mcgarrybair.com
Correspondent Name:	MCGARRY BAIR PC
Address Line 1:	45 OTTAWA AVENUE SW
Address Line 4:	GRAND RAPIDS, MICHIGAN 49503
ATTORNEY DOCKET NUMBER:	71189-5049
NAME OF SUBMITTER:	SARA L. HAAS
SIGNATURE:	/Sara L. Haas/
DATE SIGNED:	11/03/2020
Total Attachments: 4	
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DECLARATION AND ASSIGNMENT FOR PATENT AND DESIGN APPLICATIONS

TITLE OF INVENTION: STEAM CLEANING APPARATUS

As a below named inventor, I hereby declare that:

This declaration is directed to:

- ☐ the attached application
or
☒ United States Application Number or PCT International Application Number 15/885,135 filed on 01/31/2018

The above 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.

I 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.

In consideration of the sum of One Dollar (\$1.00), and other valuable and legally sufficient consideration, the receipt and adequacy of which I hereby acknowledge, I hereby sell, assign, and transfer unto BISSELL HOMECARE, INC., a corporation of the State of Michigan having its principal office and place of business in the City of Grand Rapids, County of Kent, State of Michigan, (hereinafter "Assignee"), its successors and assigns, my entire right, title, and interest in, to, and under the above identified application and the inventions disclosed therein; any Patents of the United States of America that may be obtained in respect thereof; any corresponding applications for Patent and Patents issuing therefor in all other areas of the world; and any reissues, extensions, substitutions, confirmations, divisions, and continuations of any of the foregoing (hereinafter "Invention Rights"), to have and to hold for the sole and exclusive use and benefit of Assignee, its successors and assigns forever.

I hereby covenant and agree to assist and cooperate with Assignee in the preparation and prosecution of any applications included within the Invention Rights and in the prosecution or defense of any review, opposition, or other proceeding that may arise in connection with any applications or Patent included within the Invention Rights and further to execute and deliver to Assignee any and all additional papers that may be requested by Assignee for the purpose of implementing the terms of this Assignment.

ASSIGNOR authorizes any member or representative of **BISSELL HOMECARE, INC.** to insert or complete any information in this document needed to effect its recordal in the U.S. Patent and Trademark Office.

Given Name (first and middle [if any])	Family Name or Surname
Alan J.	Krebs
Inventor's Signature	Dated 1/25/2018

On this _____ day of _____, 2018, personally appeared before me the above-named Alan J. Krebs, to me known and known to me to be the person described in and who executed the foregoing instrument and acknowledged the same to be his free act and deed in and for the purposes set forth in said instrument.

Notary Public _____ County, _____

My commission expires: _____

An application data sheet (PTO/SB/14 or equivalent), including naming the entire inventive entity, must accompany this form. Use an additional PTO/AIA/01 form for each additional inventor.

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Given Name (first and middle [if any])		Family Name or Surname	
Chi Keung		Li	
Inventor's Signature	<i>Chi Keung Li</i>	Dated	24 Jan. 2018
Witness Signature		Dated	

An application data sheet (PTO/SB/14 or equivalent), including naming the entire inventive entity, must accompany this form. Use an additional PTO/AIA/01 form for each additional inventor.

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Given Name (first and middle [if any])		Family Name or Surname	
Jing		Yang	
Inventor's Signature	<i>YANG JING</i>	Dated	<i>2018 Jan. 30th</i>
Witness Signature		Dated	

An application data sheet (PTO/SB/14 or equivalent), including naming the entire inventive entity, must accompany this form. Use an additional PTO/AIA/01 form for each additional inventor.

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Given Name (first and middle [if any])		Family Name or Surname	
Ming		Luo	
Inventor's Signature	<i>Ming Luo</i>	Dated	2/2/2018
Witness Signature	<i>John Yin</i>	Dated	2/2/2018

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