

## PATENT ASSIGNMENT COVER SHEET

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<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
CHRISTOPHER G BRUCE	01/19/2022
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	THE UNITED STATES OF AMERICA, AS REPRESENTED BY THE SECRETARY, DEPARTMENT OF HEALTH AND HUMAN SERVICES
<b>Street Address:</b>	OFFICE OF TECHNOLOGY TRANSFER, NATIONAL INSTITUTES OF HEALTH
<b>Internal Address:</b>	6701 ROCKLEDGE DRIVE, SUITE 700, MSC 7788
<b>City:</b>	BETHESDA
<b>State/Country:</b>	MARYLAND
<b>Postal Code:</b>	20892-7788
<b>PROPERTY NUMBERS Total: 2</b>	
<b>Property Type</b>	<b>Number</b>
<b>Application Number:</b>	17148170
<b>PCT Number:</b>	US2021049952
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	
<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>	
<b>Phone:</b>	6516046697
<b>Email:</b>	bpollack@winthrop.com
<b>Correspondent Name:</b>	BRIAN POLLACK
<b>Address Line 1:</b>	WINTHROP & WEINSTINE, P.A.
<b>Address Line 2:</b>	225 SOUTH SIXTH STREET, SUITE 3500
<b>Address Line 4:</b>	MINNEAPOLIS, MINNESOTA 55402
<b>ATTORNEY DOCKET NUMBER:</b>	22981.98
<b>NAME OF SUBMITTER:</b>	BRIAN POLLACK
<b>SIGNATURE:</b>	/Brian Pollack/
<b>DATE SIGNED:</b>	01/19/2022
<b>Total Attachments: 3</b>	
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**ASSIGNMENT FOR NIH/FDA/CDC INVENTIONS AIA**

**WHEREAS**, I/we,

1. Robert J. Lederman, an employee of the National Institutes of Health ;”
2. Toby Rogers, an employee of the National Institutes of Health ;”
3. Jaffar Khan, an employee of the National Institutes of Health ;”
4. Jaffar Khan, an employee of the National Institutes of Health ;”  
and
5. Christopher G. Bruce, an employee of the National Institutes of Health ;”

each a component of the United States Department of Health and Human Services, having an address at the Office of Technology Transfer, National Institutes of Health, 6701 Rockledge Drive, Suite 700, MSC 7788, Bethesda, MD 20892-7788, have made certain inventions as described and claimed in:

1. U.S. Patent Application No. 17/148,170, filed 13-Jan-2021, and entitled,  
“Tissue Cutting Systems and Methods” ;”
2. International Application No. PCT/US2021/49952, filed 10-Sep-2021, and entitled,  
“Tissue Cutting Systems and Methods” ;”
3. \_\_\_\_\_, filed \_\_\_\_\_, and entitled,  
“ \_\_\_\_\_ ” ;”

all of which are collectively referred to as the “**Patent Application(s)**.”

**WHEREAS**, I/we are the inventor(s) named in **The Patent Application(s)**; and

**WHEREAS**, the inventions described and claimed in **The Patent Application(s)** were made under such conditions as to entitle the **UNITED STATES OF AMERICA**, as represented by the **Secretary, Department of Health and Human Services** (hereinafter **the GOVERNMENT**) under Executive Order 10096 and its amendments, under statutes 35 USC §§ 200-201, §§ 206-207, and § 210, and under regulations 37 CFR Part 501 to the entire right, title, and interest in such inventions; and

**WHEREAS, THE GOVERNMENT** is desirous of acquiring all domestic and foreign right, title, and interest in the inventions described and claimed in the **Patent Application(s)**; and

**NOW, THEREFORE**, having the legal obligation to assign my/our right, title, and interest in the inventions described and claimed in the **Patent Application(s)** to the **GOVERNMENT**, having a place of business at the Office of Technology Transfer, National Institutes of Health, 6701 Rockledge Drive, Suite 700, MSC 7788, Bethesda, MD 20892-7788 and for consideration, the receipt and sufficiency of which are hereby acknowledged, I/we hereby assign and transfer to the **GOVERNMENT**:

the entire right, title, and interest in and to any and all inventions described and claimed in the **Patent Applications** and any and all issued Letters Patent(s) which may be granted thereon, and any and all continuations, divisions, reissues, or extensions thereof; and

all rights to claim priority on the basis of the **Patent Application(s)** including but not limited to applications filed through the provisions of the Patent Cooperation Treaty (“PCT Applications”); and

all applications for Letters Patent(s) that may be filed for any and all inventions described and claimed in the **Patent Application(s)** that may be filed in any foreign country and all Letters Patents that may be granted thereon in any foreign country and all extensions, renewals, and reissues thereof; and

any and all issued Letters Patents as may be granted in the United States or any foreign country to be held by the **GOVERNMENT** to the end of the term for which the same would have been held by the inventors had this assignment not been made.

I/we further agree to make, execute, and deliver to the **GOVERNMENT**, upon request, any and all papers, documents, affidavits, or other instruments that may be necessary in the prosecution of any application or applications for improvements or reissues of Letters Patent, and to assist the **GOVERNMENT** in every way as may be requested in protecting said invention.

**IN WITNESS WHEREOF** we subscribe our hands and seals on the dates shown below:

<b>Inventor 1:</b>	
_____	_____
Robert J. Lederman	Date
County of _____	Ss: _____
State of _____	
Subscribed and sworn to before me this ____ day of _____, in the year of ____.	
[Seal]	_____
	Notary Public for _____
	My Commission Expires: _____

<b>Inventor 2:</b>	
_____	_____
Toby Rogers	Date
County of _____	Ss: _____
State of _____	
Subscribed and sworn to before me this ____ day of _____, in the year of ____.	
[Seal]	_____
	Notary Public for _____
	My Commission Expires: _____

**Inventor 3:**

\_\_\_\_\_ Date \_\_\_\_\_  
Jaffar Khan  
County of \_\_\_\_\_ Ss: \_\_\_\_\_  
State of \_\_\_\_\_  
Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, in the year of \_\_\_\_.

[Seal] \_\_\_\_\_  
Notary Public for \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

**Inventor 4:**

\_\_\_\_\_ Date \_\_\_\_\_  
County of \_\_\_\_\_ Ss: \_\_\_\_\_  
State of \_\_\_\_\_  
Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, in the year of \_\_\_\_.

[Seal] \_\_\_\_\_  
Notary Public for \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

**Inventor 5:**

Christopher G. Bruce -SR1  
Digitally signed by Christopher G. Bruce -SR1  
Date: 2022.01.19 11:45:19 -05'00'

Christopher G. Bruce \_\_\_\_\_ Date \_\_\_\_\_  
County of \_\_\_\_\_ Ss: \_\_\_\_\_  
State of \_\_\_\_\_  
Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, in the year of \_\_\_\_.

[Seal] \_\_\_\_\_  
Notary Public for \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_