507241035 04/20/2022

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT7287954

SUBMISSION TYPE:		NEW ASSIGNMENT	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:		ASSIGNMENT	ASSIGNMENT		
CONVEYING PARTY DA	ТА				
		Name	Execution Date		
GARY A. FREEMAN			03/22/2016		
THOMAS E. KAIB			03/23/2016		
SHANE VOLPE			03/23/2016		
TIMOTHY F. STEVER			03/22/2016		
RECEIVING PARTY DA	ТА				
Name:	ZOLL ME	EDICAL CORPORATION			
Street Address:	269 MILL	ROAD			
City:	CHELMS	SFORD			
State/Country:	MASSAC	MASSACHUSETTS			
Postal Code:	01824	01824			
Property Type		Number			
		Number 7455955			
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INTERNATIONAL

Application No. <u>15/073,923</u>

Attorney Docket No. ______7069-1600177____

ASSIGNMENT

WHEREAS, as a below named inventor, I have invented certain new and useful improvements in

SYSTEMS AND METHODS FOR TESTING A MEDICAL DEVICE

(Invention Title)

for which I have this day executed an application for a United States Patent (hereinafter "said application").

AND/OR

X for which an application for a United States Patent was filed on <u>03/18/2016</u> (mm/dd/yyyy) and bears Application Number <u>15/073,923</u> (hereinafter "said application").

AND/OR

X for which an international patent application was filed under the Patent Cooperation Treaty on <u>03/18/2016 (mm/dd/yyyy)</u>, bearing Application No. <u>PCT/US2016/023057</u> (hereinafter "said application").

AND, WHEREAS, Zoll Medical Corporation, a corporation of Massachusetts, having a place of business at 269 Mill Road, Chelmsford, MA, 01824, hereinafter called the "assignee", is desirous of acquiring the entire right, title, and interest in and to said application and the inventions and improvements therein disclosed.

NOW, THEREFORE, for good and valuable consideration paid to me by said assignee, the receipt of which is hereby acknowledged, I as the inventor or as one of the inventors, hereinafter the assignor(s), do hereby assign, sell and transfer unto said assignee the full and exclusive right, title and interest in and to said application and the inventions and improvements therein disclosed for the United States and all foreign countries and any Letters Patent which may issue therefor in the United States and all foreign countries and all divisions, reissues, continuations, continuations-in-part, renewals and/or extensions thereof. Such assignment extends to the full ends of the terms of these applications and patents as fully and entirely as the same would have been held and enjoyed by me had this Assignment not been made.

I hereby authorize and request any attorney associated with The Webb Law Firm, Customer No. 28289, to insert here in parentheses (Application No._____, filed_____) the filing date and application number of said application when known.

I covenant that I am the lawful owner(s) of said application, inventions and improvements, that the same are unencumbered, that no license has been granted to make, use or vend the said inventions or improvements or any of them, and that I have the full right to make this Assignment.

Page 1 of 3

INTERNATIONAL Application No. 15/073.923

Attorney Docket No. _____7069-1600177

And for the consideration aforesaid, I agree individually and, if applicable, jointly that I will communicate to said assignee or the representatives thereof any facts known to me respecting said inventions and improvements, and will, upon request but without expense to me, testify in any legal proceedings, sign all lawful papers, execute all divisional, reissue, continuation, continuation-in-part, renewal and/or extension applications, make all rightful oaths, and generally do all other and further lawful acts deemed necessary or expedient by said assignee or by counsel for said assignee to assist or enable said assignee to obtain and enforce full benefits from the rights and interests herein assigned. This Assignment shall be binding upon my heirs, executors, administrators and/or assigns, as the case may be, of said assignee.

1. FULL NAME OF ASSIGNOR:	RESIDENCE:
Gary A. Freeman	Waltham, MA
EXECUTED this 2201 day of Chares	,2016 Mary A James
VITNESS: Zun O. Laly	
2. FULL NAME OF ASSIGNOR: Thomas E. Kaib	RESIDENCE: Irwin, PA
EXECUTED thisday of	, 2016
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	SIGNATURE
WITNESS:	
	-
X Checked Box indicates 1 additional page	for inventor signatures.

Page 2 of 3

PATENT REEL: 059645 FRAME: 0618

INTERNATIONAL Application No. <u>15/073.923</u> Attorney Docket No. <u>7069-1600177</u>

And for the consideration aforesaid, I agree individually and, if applicable, jointly that I will communicate to said assignee or the representatives thereof any facts known to me respecting said inventions and improvements, and will, upon request but without expense to me, testify in any legal proceedings, sign all lawful papers, execute all divisional, reissue, continuation, continuation-in-part, renewal and/or extension applications, make all rightful oaths, and generally do all other and further lawful acts deemed necessary or expedient by said assignee or by counsel for said assignee to assist or enable said assignee to obtain and enforce full benefits from the rights and interests herein assigned. This Assignment shall be binding upon my heirs, executors, administrators and/or assigns, and shall inure to the benefit of the heirs, executors, administrators, successors and/or assigns, as the case may be, of said assignee.

1. FULL NAME OF ASSIGNOR: Gary A. Freeman	RESIDENCE: Waltham, MA
EXECUTED this day of	, 2016
	SIGNATURE
WITNESS:	
	· · ·
2. FULL NAME OF ASSIGNOR: Thomas E. Kaib	RESIDENCE: Irwin, PA
EXECUTED this 2 day of MANCH	The E Kaik
	SIGNATURE
WITNESS: Juisa Ahajik	

Checked Box indicates 1 additional page for inventor signatures.

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Page 2 of 3

	INTERNATIONAL
Application No.	15/073.923

3. FULL NAME OF ASSIGNOR: Shane Volpe	RESIDENCE: Saltsburg, PA
EXECUTED this 23 May of MAAC	H. 2016 Shit Ich
	SIGNATURE
VITNESS:	
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4. FULL NAME OF ASSIGNOR: Timothy F. Stever	RESIDENCE: Lowell, MA
4. FULL NAME OF ASSIGNOR: Timothy F. Stever	RESIDENCE:
4. FULL NAME OF ASSIGNOR: Timothy F. Stever	RESIDENCE: Lowell, MA
4. FULL NAME OF ASSIGNOR:	RESIDENCE: Lowell, MA

Page 3 of 3

RECORDED: 03/28/2016

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	INTERNATIONA Application No. <u>15/073,923</u>
	Attorney Docket No. <u>7069-1600177</u>
3. FULL NAME OF ASSIGNOR: Shane Volpe	RESIDENCE: Saltsburg, PA
EXECUTED thisday of	_, 2016
	SIGNATURE
WITNESS:	
en e	-
4. FULL NAME OF ASSIGNOR: Timothy F. Stever	RESIDENCE: Lowell, MA
EXECUTED this 22 day of March	2016
	Junto Hens Signature
wiftness:	
See D. Leary	
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Page 3 of 3

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