

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT7414913

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the ASSIGNEE NAME previously recorded on Reel 048612 Frame 0692. Assignor(s) hereby confirms the ASSIGNMENT.
CONVEYING PARTY DATA	
Name	Execution Date
MICHAEL E. ZALIS	09/27/2018
MITCHELL A. HARRIS	09/18/2018
CREAGH MILFORD	09/25/2018
RECEIVING PARTY DATA	
Name:	MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION, INC.
Street Address:	55 FRUIT STREET
City:	BOSTON
State/Country:	MASSACHUSETTS
Postal Code:	02114
PROPERTY NUMBERS Total: 2	
Property Type	Number
Application Number:	14912976
Application Number:	61867497
CORRESPONDENCE DATA	
Fax Number:	(414)271-3552
<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:	4142775000
Email:	pat-dept@quarles.com,stephanie.mcnutt@quarles.com
Correspondent Name:	QUARLES & BRADY LLP
Address Line 1:	411 EAST WISCONSIN AVENUE
Address Line 2:	SUITE 2400
Address Line 4:	MILWAUKEE, WISCONSIN 53202-4428
ATTORNEY DOCKET NUMBER:	125141.01521.MGH03350
NAME OF SUBMITTER:	STEPHANIE MCNUTT
SIGNATURE:	/Stephanie McNutt/
DATE SIGNED:	07/05/2022
Total Attachments: 10	

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PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5424502

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
MICHAEL E. ZALIS	09/27/2018
MITCHELL A. HARRIS	09/18/2018
CREAGH MILFORD	09/25/2018
TIMOTHY FERRIS	09/12/2018
RECEIVING PARTY DATA	
Name:	MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION
Street Address:	55 FRUIT STREET
City:	BOSTON
State/Country:	MASSACHUSETTS
Postal Code:	02144
PROPERTY NUMBERS Total: 2	
Property Type	Number
Application Number:	14912976
Application Number:	61867497
CORRESPONDENCE DATA	
Fax Number:	(414)271-3552
<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:	4142775000
Email:	patents@quarles.com,angela.schulz@quarles.com
Correspondent Name:	QUARLES & BRADY LLP
Address Line 1:	411 E. WISCONSIN AVENUE
Address Line 4:	MILWAUKEE, WISCONSIN 53202
ATTORNEY DOCKET NUMBER:	125141.01521
NAME OF SUBMITTER:	ANGELA N. SCHULZ
SIGNATURE:	/ANGELA N. SCHULZ/
DATE SIGNED:	03/15/2019
Total Attachments: 5	
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ASSIGNMENT

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MZ

5/2/22

WHEREAS, WE, Michael E. Zalis of Newtonville, Massachusetts, Mitchell A. Harris of West Newton, Massachusetts, Creagh Milford of Boston, Massachusetts, and Timothy Ferris of Boston, Massachusetts, have made certain inventions that are described in U.S. Provisional Patent Application No. 61/867,497 filed August 19, 2013, and PCT International Application PCT/US2014/01652 filed August 19, 2014, and U.S. Patent Application 14/912,976 filed February 19, 2016, entitled **SYSTEM AND METHOD FOR STRUCTURED SUPPORT OF CLINICAL HEALTHCARE PROFESSIONALS**, AND

Massachusetts General Physicians Organization, Inc.

WHEREAS, ~~MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION~~ (hereafter referred to as "said Company"), a non-profit corporation of the COMMONWEALTH OF MASSACHUSETTS having a place of business at 55 FRUIT STREET, BOSTON, MASSACHUSETTS 02144 is desirous of acquiring the entire interest in said inventions throughout the United States of America and the territories thereof; for all other countries; and under all international agreements,

MZ

5/2/22

NOW, THEREFORE, for and in consideration of One Dollar (\$1.00), and other good and valuable consideration, receipt whereof is hereby acknowledged, we hereby sell, assign, and transfer unto said Company, its successors and assigns, the entire right, title, and interest throughout the United States of America and the territories thereof, for all foreign countries and under all international agreements in and to said inventions, the aforesaid application, all other applications hereafter filed in the United States, in any other country, or under any international agreement based in whole or in part on said inventions, and all Letters Patents granted upon said applications by the United States, by any other country or under any international agreement, and do hereby authorize and request the Commissioner of Patents and Trademarks to issue said Letters Patent to said Company.

We further grant to said Company, its successors, and assigns, the right to claim for any of said applications the full benefits and priority rights of any international agreement between the United States and any foreign country or countries of between any other countries.

We hereby warrant that we have the full right to make the conveyance herein, and we hereby covenant that we, our heirs, legal representatives, and assigns will, when requested, communicate to said Company, its representatives, successors, and assigns all facts known respecting said inventions; execute all divisional, continuing, reissue, reexamination, and foreign or international applications, together with individual assignments therefor; make all rightful oaths; sign all lawful papers; testify in any legal proceeding; and generally do everything possible to aid said Company, its successors, and assigns in the obtaining of Letters Patent.

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ASSIGNMENT

051652 MH 04/21/22

WHEREAS, WE, Michael E. Zalis of Newtonville, Massachusetts, Mitchell A. Harris of West Newton, Massachusetts, Creagh Milford of Boston, Massachusetts, and Timothy Ferris of Boston, Massachusetts, have made certain inventions that are described in U.S. Provisional Patent Application No. 61/867,497 filed August 19, 2013, and PCT International Application PCT/US2014/01652 filed August 19, 2014, and U.S. Patent Application 14/912,976 filed February 19, 2016, entitled **SYSTEM AND METHOD FOR STRUCTURED SUPPORT OF CLINICAL HEALTHCARE PROFESSIONALS, AND**

Massachusetts General Physicians Organization, Inc.

MH 04/21/22

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ASSIGNMENT

051652

5/10/22

WHEREAS, WE, Michael E. Zalis of Newtonville, Massachusetts, Mitchell A. Harris of West Newton, Massachusetts, Creagh Milford of Boston, Massachusetts, and Timothy Ferris of Boston, Massachusetts, have made certain inventions that are described in U.S. Provisional Patent Application No. 61/867,497, filed August 19, 2013, and PCT International Application PCT/US2014/01652 filed August 19, 2014, and U.S. Patent Application 14/912,976 filed February 19, 2016, entitled **SYSTEM AND METHOD FOR STRUCTURED SUPPORT OF CLINICAL HEALTHCARE PROFESSIONALS**, AND

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Massachusetts General Physicians Organization, Inc.

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NOW, THEREFORE, for and in consideration of One Dollar (\$1.00), and other good and valuable consideration, receipt whereof is hereby acknowledged, we hereby sell, assign, and transfer unto said Company, its successors and assigns, the entire right, title, and interest throughout the United States of America and the territories thereof, for all foreign countries and under all international agreements in and to said inventions, the aforesaid application, all other applications hereafter filed in the United States, in any other country, or under any international agreement based in whole or in part on said inventions, and all Letters Patents granted upon said applications by the United States, by any other country or under any international agreement, and do hereby authorize and request the Commissioner of Patents and Trademarks to issue said Letters Patent to said Company.

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We hereby warrant that we have the full right to make the conveyance herein, and we hereby covenant that we, our heirs, legal representatives, and assigns will, when requested, communicate to said Company, its representatives, successors, and assigns all facts known respecting said inventions; execute all divisional, continuing, reissue, reexamination, and foreign or international applications, together with individual assignments therefor; make all rightful oaths; sign all lawful papers; testify in any legal proceeding; and generally do everything possible to aid said Company, its successors, and assigns in the obtaining of Letters Patent.

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IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

9/27/18
Date

Michael E. Zalis
Michael E. Zalis

UNITED STATES OF AMERICA)
STATE OF MASSACHUSETTS) ss:
COUNTY OF _____)

Before me on this 27th day of September 2018, came Michael E. Zalis, to me known to be the person named in the foregoing assignment and he/she acknowledges his/her execution therefore to be his/her free act and deed.

(SEAL)

[Signature]
Notary Public, State of Massachusetts

My Commission Expires: 07.13.2023

IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

Date

Mitchell A. Harris

UNITED STATES OF AMERICA)
STATE OF MASSACHUSETTS) ss:
COUNTY OF _____)

Before me on this _____ day of _____, 2018, came Mitchell A. Harris, to me known to be the person named in the foregoing assignment and he/she acknowledges his/her execution therefore to be his/her free act and deed.

(SEAL)

Notary Public, State of Massachusetts

My Commission Expires: _____

IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

Date Michael E. Zalis

UNITED STATES OF AMERICA)
STATE OF MASSACHUSETTS) ss:
COUNTY OF _____)

Before me on this _____ day of _____, 2018, came Michael E. Zalis, to me known to be the person named in the foregoing assignment and he/she acknowledges his/her execution therefore to be his/her free act and deed.

(SEAL)

Notary Public, State of Massachusetts

My Commission Expires:

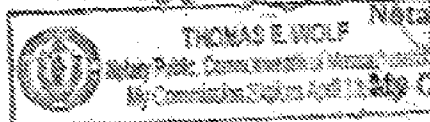
IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

Date 9/18/18 Mitchell A. Harris *[Signature]*

UNITED STATES OF AMERICA)
STATE OF MASSACHUSETTS) ss:
COUNTY OF Middlesex)

Before me on this 18 day of Sept, 2018, came Mitchell A. Harris, to me known to be the person named in the foregoing assignment and he/she acknowledges his/her execution therefore to be his/her free act and deed.

(SEAL)



Notary Public, State of Massachusetts

My Commission Expires:

4-13-23

IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

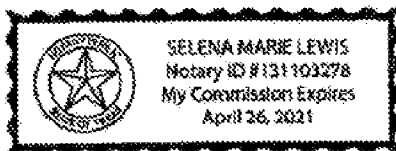
September 25, 2018
Date

Creagh Milford
Creagh Milford

UNITED STATES OF AMERICA)
STATE OF MASSACHUSETTS ~~Texas~~) ss:
COUNTY OF Collins)

Before me on this 25th day of September, 2018, came Creagh Milford, to me known to be the person named in the foregoing assignment and he/she acknowledges his/her execution therefore to be his/her free act and deed.

(SEAL)



Selena Marie Lewis
Notary Public, State of ~~Massachusetts~~ Texas
My Commission Expires: April 26, 2021

IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

Date

Timothy Ferris

UNITED STATES OF AMERICA)
STATE OF MASSACHUSETTS) ss:
COUNTY OF _____)

Before me on this _____ day of _____, 2018, came Timothy Ferris, to me known to be the person named in the foregoing assignment and he/she acknowledges his/her execution therefore to be his/her free act and deed.

(SEAL)

Notary Public, State of Massachusetts
My Commission Expires: _____

IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

Date Creagh Milford

UNITED STATES OF AMERICA)
STATE OF MASSACHUSETTS) ss:
COUNTY OF _____)

Before me on this _____ day of _____, 2018, came Creagh Milford, to me known to be the person named in the foregoing assignment and he/she acknowledges his/her execution therefore to be his/her free act and deed.

(SEAL)

Notary Public, State of Massachusetts

My Commission Expires: _____

IN TESTIMONY WHEREOF, I have hereunto executed this assignment on the date indicated below.

9/10/18
Date Timothy Ferris

UNITED STATES OF AMERICA)
COMMONWEALTH OF MASSACHUSETTS)
COUNTY OF Suffolk, ss)

On this 12th day of September, 2018, before me, the undersigned notary public, personally appeared Timothy G. Ferris and proved to me through satisfactory evidence of Identification, which were personally known to me, to be the person whose name is signed on the preceding or attached document and acknowledged to me that he signed it voluntarily for its stated purpose.

Nancy B. Sullivan
Notary Public

My Commission Expires: 11/29/2024