

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT7457636

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
SPENCER SMITH	07/28/2022
RECEIVING PARTY DATA	
Name:	SIGNATURE HEALTHCARE, LLC
Street Address:	12201 BLUEGRASS PARKWAY
City:	LOUISVILLE
State/Country:	KENTUCKY
Postal Code:	40299
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	29699388
CORRESPONDENCE DATA	
Fax Number:	
<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:	5024521233
Email:	carrithersiplaw@gmail.com
Correspondent Name:	DAVID W CARRITHERS
Address Line 1:	120 W. STEPHEN FOSTER AVE, SUITE 101
Address Line 4:	BARDSTOWN, KENTUCKY 40004
NAME OF SUBMITTER:	DAVID W. CARRITHERS
SIGNATURE:	/David W. Carrithers/
DATE SIGNED:	07/28/2022
	This document serves as an Oath/Declaration (37 CFR 1.63).
Total Attachments: 1	
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