

## PATENT ASSIGNMENT COVER SHEET

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EPAS ID: PAT7690885

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
DAVID M.T. TING	07/15/2015
ELIOT M. RUBINOV	07/09/2015
MAE-ELLEN GAVIN	07/16/2015
KYLE VERNES	07/14/2015
ROELF KUITSE	07/14/2015
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	IMPRIVATA, INC.
<b>Street Address:</b>	10 MAGUIRE ROAD, BLDG. 1
<b>Internal Address:</b>	STE. 125
<b>City:</b>	LEXINGTON
<b>State/Country:</b>	MASSACHUSETTS
<b>Postal Code:</b>	02421
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
Application Number:	17388205
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(202)739-3001
<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>	202-739-3000
<b>Email:</b>	phpatentcorrespondence@morganlewis.com, amanda.mcintyre@morganlewis.com
<b>Correspondent Name:</b>	MORGAN, LEWIS, & BOCKIUS LLP (B0)
<b>Address Line 1:</b>	1111 PENNSYLVANIA AVENUE, NW&#8203;
<b>Address Line 4:</b>	WASHINGTON, D.C. 20004-2541
<b>ATTORNEY DOCKET NUMBER:</b>	IPV-035C2/107513-5035
<b>NAME OF SUBMITTER:</b>	MATTHEW T. CURRIE
<b>SIGNATURE:</b>	/Matthew T. Currie/
<b>DATE SIGNED:</b>	12/13/2022

**Total Attachments: 7**

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**PATENT APPLICATION**  
**Assignment**

For good and valuable consideration, the receipt of which is hereby acknowledged, we, the undersigned, co-inventors:

**DAVID M. T. TING**  
**ELIOT M. RUBINOV**  
**MAE-ELLEN GAVIN**  
**KYLE VERNEST**  
**and**  
**ROELF KUITSE**

Who have created a certain invention for which an application for United States Letters Patent entitled “**Coordinating Communications Among Healthcare Providers**”, was filed at the U.S. Patent and Trademark Office on **April 7, 2015** and assigned U.S. Patent Application Serial No. **14/680,590**.

Do hereby sell, assign and transfer to **Imprivata, Inc.**, a corporation having a place of business at 10 Maguire Road, Bldg 1, Ste. 125, Lexington, MA 02421 its successors, assigns, and legal representatives, the full and exclusive right to said invention and said application and to any and all inventions described in said invention and said application and to any and all inventions described in said application for the United States, its territorial possessions and all foreign countries, and the entire right, title and interest in and to any and all Letters Patent which may be granted therefor in the United States, its territorial possessions and all foreign countries; and in and to any and all provisionals, continuations-in-part, continuations, divisions, substitutes, reissues, extensions thereof, and all other applications for Letters Patent relating thereto which have been or shall be filed in the United States, its territorial possession and/or any foreign countries, and all rights, together with all priority rights, under any of the international conventions, unions, agreements, act, and treaties, including all future conventions, unions, agreements, acts, and treaties;

Agree(s) that **Imprivata, Inc.**, hereinafter referred to as Assignee, may apply for and receive Letters Patent for said invention and said inventions, hereinafter referred to as said invention, in its own name, in the United States, its territorial possessions, and all foreign countries; and that, when requested to carry out in good faith the intent and purpose of this assignment, at the expense of said Assignee, its successors, assigns and legal representatives, the undersigned will execute all continuations-in-part, continuations, divisions, substitutes, reissues, extensions thereof, execute all rightful oaths, assignments, powers of attorney and other papers, testify in any legal or quasi legal proceedings; communicate to said Assignee, its successors, assigns or legal representatives all facts known to the undersigned relating to said invention and the history thereof; and generally do everything possible which said Assignee, its successors, assigns, or legal representatives shall consider desirable for aiding in securing, maintaining and enforcing proper patent protection for said invention and for vesting title to said invention and all applications for patents on said invention in said Assignee, successors, assigns, or legal representatives; and

Covenant with said Assignee, its successors, assigns, or legal representatives that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been made to others by the undersigned, and that full right to convey the same has herein expressed is possessed by the undersigned.

Assignor(s) hereby grant(s) the following individuals the power to insert on this Assignment any further identification which may be necessary or desirable in order to comply with the rules of the United States Patent and Trademark Office for recordation of this document:

MORGAN, LEWIS & BOCKIUS LLP

Assignor(s) acknowledge(s) an obligation of assignment of this invention to Assignee at the time the invention was made.

IN THE TESTIMONY WHEREOF we have hereunto set our signatures on the date indicated below.

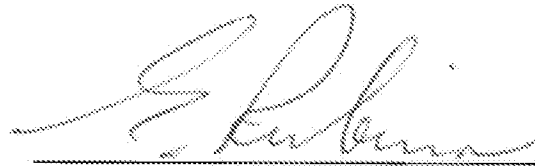
  
\_\_\_\_\_  
DAVID M. T. TING

Date: July 15, 2015

United States of America )  
State of MA ) ss.:  
County of Middlesex )

On this 15 day of July, 2015, before me  
personally came DAVID M. T. TING, to me known to be the individual  
described in and who executed the foregoing instrument, and acknowledged execution  
of the same.

  
\_\_\_\_\_  
Notary Public

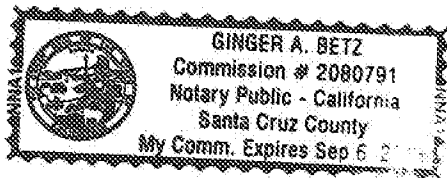


ELIOT M. RUBINOV

Date: JULY 9, 2015

United States of America )  
State of CALIFORNIA ) ss.:  
County of SANTA CRUZ )

On this 7 day of JULY 2015, GINGER A. BETZ, before me  
personally came ELIOT M. RUBINOV, to me known to be the individual  
described in and who executed the foregoing instrument, and acknowledged execution  
of the same.

  
Notary Public

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

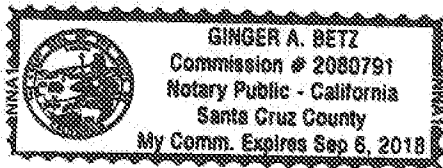
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
 County of SANTA CRUZ )  
 On JULY 9, 2015 before me, GINGER A. BETZ, NOTARY PUBLIC,  
 Date Here Insert Name and Title of the Officer  
 personally appeared ELIOT M. RUBINOV  
 Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person~~s~~ whose name~~s~~ is/~~are~~  
 subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in  
 his/~~her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~s~~ on the instrument the person~~s~~,  
 or the entity upon behalf of which the person~~s~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws  
 of the State of California that the foregoing paragraph  
 is true and correct.

WITNESS my hand and official seal.



Signature Ginger A. Betz  
 Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or  
 fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_  
 Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_  
 Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: _____	Signer's Name: _____
<input type="checkbox"/> Corporate Officer — Title(s): _____	<input type="checkbox"/> Corporate Officer — Title(s): _____
<input type="checkbox"/> Partner — <input type="checkbox"/> Limited <input type="checkbox"/> General	<input type="checkbox"/> Partner — <input type="checkbox"/> Limited <input type="checkbox"/> General
<input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact	<input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact
<input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator	<input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
Signer Is Representing: _____	Signer Is Representing: _____

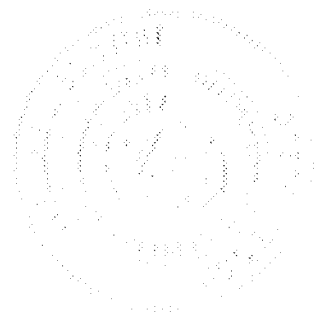
Mae-Elle Gavin  
MAE-ELLEN GAVIN

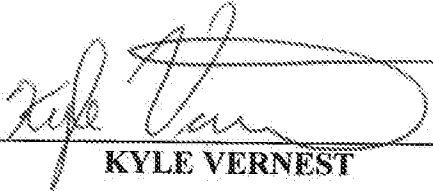
Date: July 16, 2015

United States of America )  
State of MA ) ss.:  
County of Middlesex )

On this 16 day of July, 2015, before me  
personally came MAE-ELLEN GAVIN, to me known to be the individual  
described in and who executed the foregoing instrument, and acknowledged execution  
of the same.

Amelia B. Burt  
Notary Public

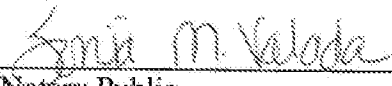


  
\_\_\_\_\_  
**KYLE VERNEST**

Date: July 14, 2015

United States of America )  
State of MA ) ss.:  
County of Middlesex )

On this 14 day of July, 2015, before me  
personally came **KYLE VERNEST**, to me known to be the individual  
described in and who executed the foregoing instrument, and acknowledged execution  
of the same.

  
\_\_\_\_\_  
Notary Public



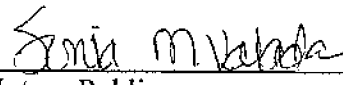


  
\_\_\_\_\_  
ROELF KUITSE

Date: 7/14/15

United States of America )  
State of MA ) ss.:  
County of Middlesex )

On this 14 day of JULY, 2015, before me  
personally came ROELF KUITSE, to me known to be the individual  
described in and who executed the foregoing instrument, and acknowledged execution  
of the same.

  
\_\_\_\_\_  
Notary Public