

FORM PTO-1618A  
Expires 06/30/99  
OMB 0651-0027

07-27-1998



100776884

U.S. Department of Commerce  
Patent and Trademark Office  
TRADEMARK

### RECORDATION FORM COVER SHEET TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

MRO 2-21-98

#### Submission Type

- New
- Resubmission (Non-Recordation)  
Document ID # \_\_\_\_\_
- Correction of PTO Error  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_
- Corrective Document  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

#### Conveyance Type

- Assignment  License
- Security Agreement  Nunc Pro Tunc Assignment  
Effective Date  
Month Day Year \_\_\_\_\_
- Merger
- Change of Name
- Other \_\_\_\_\_

#### Conveying Party

Mark if additional names of conveying parties attached

Name FDC Packaging, Inc.

Execution Date  
Month Day Year  
07 09 98

Formerly \_\_\_\_\_

- Individual  General Partnership  Limited Partnership  Corporation  Association
- Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Massachusetts

#### Receiving Party

Mark if additional names of receiving parties attached

Name Rhoads, Charles

DBA/AKA/TA \_\_\_\_\_

Composed of \_\_\_\_\_

Address (line 1) 92 North Street

Address (line 2) \_\_\_\_\_

Address (line 3) Medfield  
City

MA

State/Country

02052

Zip Code

- Individual  General Partnership  Limited Partnership  Corporation  Association
- Other \_\_\_\_\_

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Citizenship/State of Incorporation/Organization U.S.

07/23/1998 SSMITH 00000002 1763902

FOR OFFICE USE ONLY

01 FC:481 40.00 OP  
02 FC:482 25.00 OP

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to: 0069  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

**Domestic Representative Name and Address** Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address** Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments. #

**Trademark Application Number(s) or Registration Number(s)**  Mark if additional numbers attached  
Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)			Registration Number(s)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1763902"/>	<input type="text" value="1764541"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties** Enter the total number of properties involved. #

**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41): \$

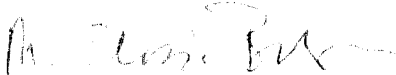
Method of Payment: Enclosed  Deposit Account

Deposit Account  
(Enter for payment by deposit account or if additional fees can be charged to the account.)  
Deposit Account Number: #

Authorization to charge additional fees: Yes  No

**Statement and Signature**

*To the best of my knowledge and belief the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.*

M. Elissa Boisvert, Esquire 

Name of Person Signing Signature Date Signed

RECORDATION FORM COVER SHEET  
CONTINUATION  
TRADEMARKS ONLY

**Conveying Party**

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

Formerly

Individual

General Partnership

Limited Partnership

Corporation

Association

Other

Citizenship State of Incorporation/Organization

**Receiving Party**

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AK/A/T/A

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

  
City  
State/Country  
Zip Code

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General Partnership

Limited Partnership

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UNIFORM COMMERCIAL CODE - FINANCING STATEMENT  
FORM UCC-1

This financing statement covers the following types or items of property:

All Debtor's accounts, contract rights, chattel papers, general intangibles, choses in action, documents, and instruments; all obligations owing to Debtor; all Debtor's goodwill, trade secrets, computer programs, customer lists, trade names, trademarks, and patents; all Debtor's books and records; all Debtor's deposit accounts; all inventory and other tangible personal property held for sale or lease or furnished or to be furnished or used or consumed in Debtor's business wherever located, whether now existing or hereafter arising of every kind and nature. The claim of the secured party to proceeds hereunder shall not be deemed a consent to the sale or other disposition of any of the collateral. The security interest hereby claimed relates to all the foregoing types of collateral whether now owned or hereafter acquired or arising.

All of the Debtor's raw materials, lumber, shingles, equipment and appliances including but not limited to air conditioners, ovens, stoves, furnaces, burners, sinks, bathtubs, plumbing, fixtures, electrical systems, lighting fixtures, vacuum systems, shrubs, bushes, sprinkler systems, fire and burglary alarm systems, heat and/or smoke detection systems, if any, which are solely related to a certain parcel of land with the building thereon, known and numbered as 113 Adams Street, Medfield, Massachusetts, whether now owned or hereafter acquired or constructed by the Debtor together with all substitutions, replacements, and additions thereto, all as defined in the Uniform Commercial Code without limit or qualification, whether now in existence and affixed to or located in, or hereafter affixed to or located in the real property.