

01-07-1999



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RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

MAD 1.4.99

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

Submission Type

- New
- Resubmission (Non-Recordation)  
Document ID # 100823767
- Correction of PTO Error  
Reel # [ ] Frame # [ ]
- Corrective Document  
Reel # [ ] Frame # [ ]

Conveyance Type

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

Conveying Party

Mark if additional names of conveying parties attached

Name Perceptics Corporation

Execution Date  
Month Day Year  
08 13 98

Formerly [ ]

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other [ ]
- Citizenship/State of Incorporation/Organization Tennessee

Receiving Party

Mark if additional names of receiving parties attached

Name Response, Inc.

DBA/AKA/TA [ ]

Composed of [ ]

Address (line 1) Post Office Box 66

Address (line 2) [ ]

Address (line 3) Jackson

Minnesota

56143

City

State/Country

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 Minnesota

40E

FOR OFFICE USE ONLY

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:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

REEL: 1836 FRAME: 0698

**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="1,874,401"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<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.

Mark P. Kovalchuk

December 28, 1998

Name of Person Signing

Signature

Date Signed

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE

In re Trademark Registration of )  
Perceptics Corporation, a )  
Tennessee corporation )  
 )  
Registration No.: 1,874,401 )  
Registered: January 17, 1995 )  
Mark: TOTAL RESPONSE )  
Class: International 42 )  
 )

ASSIGNMENT OF REGISTRATION

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STATE OF TENNESSEE )  
 ) ss.  
COUNTY OF KNOX )

WHEREAS, Perceptics Corporation, a Tennessee corporation, of Knoxville, Tennessee 37932-3350, has adopted, used and is using a mark which is registered in the United States Patent and Trademark Office, Registration No. 1,874,401, dated January 17, 1995; and

WHEREAS, Response, Inc., a Minnesota corporation, of Post Office Box 66, Jackson, Minnesota 56143, is desirous of acquiring said mark, and the registration thereof.

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, said Perceptics Corporation, a Tennessee corporation, does hereby assign unto the said Response, Inc., a Minnesota corporation, all right, title and interest in and

to the said mark, together with the good will of the business symbolized by the mark, and the registration thereof, No. 1,874,401.

PERCEPTICS CORPORATION

Dated: August 13, 1998.

By *William A. Black*  
Its President

STATE OF TENNESSEE )  
  ) ss.  
COUNTY OF KNOX )

The foregoing instrument was acknowledged before me this 13th day of August, 1998, by William A. Black, the President of Perceptics Corporation on behalf of the corporation.

*Mary Jane Pitts*  
Notary Public

*My commission expires: April 2, 2000*