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

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RECORDATION FORM COVER SHEET
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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 #
- Correction of PTO Error
Reel # Frame #
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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

Execution Date
Month Day Year

Formerly

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

Receiving Party

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Name

DBA/AKATA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

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Zip Code

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

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.)

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01 FC:481
02 FC:482

40.00 DP
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Mail documents to be recorded with required cover sheet(s) information to:
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Name

Address (line 1)

Address (line 2)

Address (line 3)

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Correspondent Name and Address

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Name

Address (line 1)

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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)

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.

KEITH ROBERTS

Name of Person Signing

[Signature]

Signature

March 2, 1999

Date Signed

ASSIGNMENT OF TRADEMARKS

WHEREAS, The Compucare Company, a Delaware corporation (the "Assignor"), is the registered owner of those certain trademarks entitled (i) "COMPUCARE" Registration No. 1,182,558, (ii) "AFFINITY" Registration No. 2,046,173, and (iii) "AFFINITYSTAT" Application Serial No. 75/325,689 (the "Trademarks").

WHEREAS, QuadraMed Corporation, a Delaware corporation (the "Assignee"), is desirous of acquiring the Trademarks.

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, the Assignor does hereby assign to the Assignee all right, title and interest in and to the Trademarks and the goodwill of the business symbolized thereby.

Dated: March 2, 1999.

THE COMPUCARE COMPANY

By: KR
Name: KEITH ROBERTS
Title: SECRETARY

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