

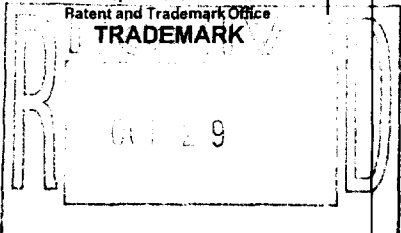
11-03-1999

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



101189964

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



MAD 10/29/99

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

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 # _____
- Corrective Document
Reel # _____ Frame # _____

Conveyance Type

- Assignment
- License
- Security Agreement
- Nunc Pro Tunc Assignment
Effective Date
Month Day Year
06 01 98
- Merger
- Change of Name
- Other _____

Conveying Party

Mark if additional names of conveying parties attached
Execution Date
Month Day Year

Name STORZ INSTRUMENT COMPANY

Formerly _____

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association

Other _____

Citizenship/State of Incorporation/Organization Missouri

Receiving Party

Mark if additional names of receiving parties attached

Name BAUSCH & LOMB PHARMACEUTICALS, INC.

DBA/AKA/TA _____

Composed of _____

Address (line 1) 8500 Hidden River Parkway

Address (line 2) _____

Address (line 3) Tampa Florida 33637
City State/Country Zip Code

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association

Other _____

Citizenship/State of Incorporation/Organization Delaware

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.)

FOR OFFICE USE ONLY

11/02/1999 MTHAI1 00000222 634124

01 FC:481 (40.00 DP)

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

TRADEMARK
REEL: 001983 FRAME: 0940

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"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

<input type="text" value="634124"/>	<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.

STEPHANIE WADE

Name of Person Signing

Stephanie Wade

Signature

10/29/99

Date Signed

ASSIGNMENT

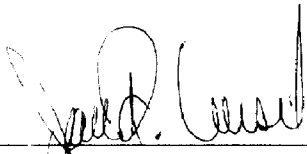
WHEREAS, STORZ INSTRUMENT COMPANY ("Assignor"), a Missouri corporation, having its principal offices at 3365 Tree Court Industrial Blvd., St. Louis, Missouri 63122, is the owner of all right, title and interest in and to the trademark FLUOR I STRIP ("the Mark"), which was registered in the United States Patent and Trademark Office, Registration No. 634,124, registered on September 4, 1956;

WHEREAS, BAUSCH & LOMB PHARMACEUTICALS, INC. ("Assignee"), a Delaware corporation, having a business address of 8500 Hidden River Parkway, Tampa, Florida 33637, has acquired all right, title and interest in and to the Mark and the registration thereof, together with the goodwill of the business associated with the Mark, nunc pro tunc as of June 1, 1998;


WHEREAS, the parties desire to ratify said assignment;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor does hereby assign to Assignee all right, title and interest in and to the Mark and the registration thereof, together with the goodwill of the business symbolized by the Mark nunc pro tunc as of June 1, 1998.

STORZ INSTRUMENT COMPANY

By 
 Name: Jean F. Geisel
 Title: Secretary
 Date: September 27, 1999

Subscribed and sworn to before me this 27th day of September, 1999.


 Notary Public
 My Commission Expires 5/31/2001

LEA ANN GAMMIERO
 Notary Public in the State of New York
 Monroe County
 Commission Expires May 31, 2001