



MRD 12-17-99

101254578

To the Honorable Commissioner of Patents and Trademarks. Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): <u>Tulsa Winch, Inc.</u></p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation-State <input type="checkbox"/> Other</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other</p> <p>Execution Date: <u>Dec. 6th, 1999</u></p>	<p>2. Name and address of receiving party(ies): Name: <u>Delaware Capital Formation, Inc.</u> Internal Address: <u>Suite 102</u> Street Address: <u>1403 Faulk Road</u> City: <u>Wilmington</u> State: <u>DE</u> ZIP: <u>19803</u></p> <p><input type="checkbox"/> Individual(s) Citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State <u>Delaware</u> <input type="checkbox"/> Other</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input type="checkbox"/> No (Designation must be a separate document from Assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>4. Application number(s) or registration number(s):</p> <p>A. Trademark Application No.(s) <u>75/664,565</u> <u>75/665,744</u> Additional numbers attached?</p>	<p>B. Trademark registration No.(s) <u>1,485,053</u> <u>512,755</u> <u>831,401</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>William S. Dorman</u> Internal Address: <u>830 Bedcon Building</u> Street Address: <u>406 S. Boulder</u> City: <u>Tulsa</u> State: <u>OK</u> ZIP: <u>74103</u></p>	<p>6. Total number of applications and registrations involved: <u>5</u></p> <p>7. Total fee (37 CFR 3.41).....\$ <u>140.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to the deposit account</p> <p>8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account)</p>

DO NOT USE THIS SPACE

9. 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.

William S. Dorman
Name of Person Signing

William S. Dorman
Signature

12/17/99
Date

02/01/2000 DNGUYEN 00000003 75664565

01 FC:481
02 FC:482

40.00 OP
100.00 OP

Total number of pages comprising cover sheet: _____

