

07-03-2000



101394406

5.24.00

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

Merger  Change of Name

Other

Effective Date  
Month Day Year  
 05  03  00

Conveying Party

Mark if additional names of conveying parties attached

Name  Execution Date  
Month Day Year  
 05  03  00

Formerly

Individual  General Partnership  Limited Partnership  Corporation  Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City State/Country Zip Code

Individual  General Partnership  Limited Partnership  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.)

Corporation  Association

Other

Citizenship/State of Incorporation/Organization

FOR OFFICE USE ONLY

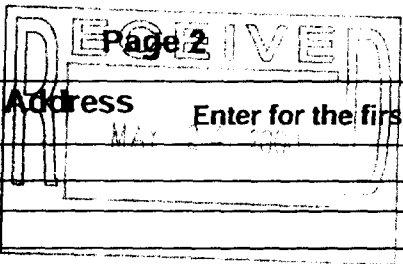
06/30/2000 DNGUYEN 00000116 232405 76009432

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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. 20503

REEL: 002096 FRAME: 0995



**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" value="76/009,432"/>	<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"/>	<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.

Robert A. Rosenberg

Name of Person Signing

Signature

5/24/00

Date Signed

## TRADEMARK ASSIGNMENT

This Assignment is made between QUADRAMED CORPORATION, a Delaware corporation, QUADRAMED OPERATING CORPORATION, a Delaware corporation, having their principal place of business located at 22 Pelican Way, San Rafael, CA 94901 (collectively "Assignors"), and CHARTONE, INC., a Delaware corporation, having an address of 226 Airport Parkway, Suite 200, San Jose, CA 95110 ("Assignee").

WHEREAS, Assignors and Assignee have entered into that certain Asset Purchase Agreement dated as of even date herewith (the "Asset Purchase Agreement");

WHEREAS, pursuant to the Asset Purchase Agreement, Assignors have agreed to transfer to Assignee all their right, title and interest in and to the trademark listed on the attached Schedule A, all applications or registrations therefor on the Principal Register of the United States Patent and Trademark Office, and the common law rights pertaining thereto and all goodwill associated therewith (collectively, the "Trademark"); and


WHEREAS, Assignee has agreed to take assignment of the Trademark.

NOW, THEREFORE, in consideration of payment of ten dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Assignors, for themselves and their affiliates, do sell, assign and transfer unto Assignee, its successors and assigns, all their right, title and interest in and to the Trademark and all of the goodwill associated therewith, together with the right to recover damages and profits and all other remedies for past infringements thereof.

This Assignment is effective as of the date hereof. Assignors agree to sign and/or have their appropriate affiliate or employee sign any additional assignments and other appropriate documentation necessary to effectuate and validate this Assignment as soon as is practicable after the date of this Assignment.

IN WITNESS WHEREOF, Assignors expressly intending to be legally bound thereby, have caused this Agreement to be duly executed this 3rd day of May, 2000.

QUADRAMED CORPORATION

By:   
Name:  
Title:

STATE OF \_\_\_\_\_ )


)ss

COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of May, 2000, before me personally appeared \_\_\_\_\_, to me personally known, who, being duly sworn, did say that he is the \_\_\_\_\_ of QuadraMed Corporation and that he duly executed the foregoing instrument for and on behalf of QuadraMed Corporation being duly authorized to do so and that said individual acknowledged said instrument to be the free act and deed of said corporation.

\_\_\_\_\_  
Notary Public

QUADRAMED OPERATING CORPORATION

By:   
Name:  
Title:

STATE OF \_\_\_\_\_ )

)ss

COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of May, 2000, before me personally appeared \_\_\_\_\_, to me personally known, who, being duly sworn, did say that he is the \_\_\_\_\_ of QuadraMed Operating Corporation and that he duly executed the foregoing instrument for and on behalf of QuadraMed Operating Corporation being duly authorized to do so and that said individual acknowledged said instrument to be the free act and deed of said corporation.

\_\_\_\_\_  
Notary Public

0740287.01/1(0519.00033

**Schedule A**

<b><u>Mark</u></b>	<b><u>Applicant</u></b>	<b><u>Serial No.</u></b>	<b><u>Filing Date</u></b>
CHARTONE	QuadraMed Corporation	76/009,432	3/24/00