

08-17-2001

FORM PTO-1618A  
Expires 06/30/98  
OMB 0651-0027



101815644

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

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  
\_\_\_\_\_

Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name Parkside Associates, Inc.

12-4-00

Formerly \_\_\_\_\_

- Individual  General Partnership  Limited Partnership  Corporation  Association
- Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Illinois

Receiving Party

Mark if additional names of receiving parties attached

Name Press Ganey Associates, Inc.

DBA/AKA/TA \_\_\_\_\_

Composed of \_\_\_\_\_

Address (line 1) 404 Columbia Place

Address (line 2) \_\_\_\_\_

Address (line 3) South Bend

Indiana

46601

City

State/Country

Zip Code

- Individual  General Partnership  Limited Partnership  Association
- 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 Indiana

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

TRADEMARK  
REEL: 002312 FRAME: 0978

1/9/01

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

**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

(312) 214-8314

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="1682891"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1795361"/>	<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.

*Melissa A Vallone*

*Melissa A Vallone*

*1/5/01*

Name of Person Signing

Signature

Date Signed

**TRADEMARK**

REEL: 002312 FRAME: 0979

**ASSIGNMENT****(Trademarks and Service Marks)**

**FOR GOOD AND VALUABLE CONSIDERATION**, the receipt and sufficiency of which is hereby acknowledged, PARKSIDE ASSOCIATES, INC., an Illinois corporation ("Seller"), hereby sells, transfers and assigns to PRESS, GANEY ASSOCIATES, INC., an Indiana corporation ("Buyer"), all of its rights, title and interest in and to the following described marks, the registrations thereto, and the goodwill of the business in which the marks are used, together with all claims for damages by reason of infringement, with the right to sue for and collect the same for its own use and for the use of its successors and assigns:

<u>Mark</u>	<u>Registration Number</u>	<u>Registration Date</u>
PARTNERS IN QUALITY (Trademark)	1682891	04/14/92
PARTNERS IN QUALITY (Service Mark)	1795361	09/28/93

Seller hereby agrees to execute and deliver any further documents or instruments which may be necessary, lawful and proper to facilitate the assignments contemplated hereunder, including without limitation, the recordation of this Assignment, or otherwise to secure title thereto in Buyer.

PARKSIDE ASSOCIATES, INC.

By: 

Charles P. Francis, Chairman

Date: 12/4/02

STATE OF Indiana )  
 ) SS:  
COUNTY OF St. Joseph )

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared Charles P. Francis and acknowledged that he is the Chairman of PARKSIDE ASSOCIATES, INC.; that he is authorized by said Corporation to execute the foregoing Assignment on behalf of said Corporation; and that he did execute the foregoing Assignment for and on behalf of said Corporation.

Witness my hand and Notarial Seal this 4<sup>th</sup> day of December, 2000.

Cynthia M. Benedet  
Cynthia M. Benedet Notary Public  
Residing in St. Joseph County, IN

My Commission Expires:  
6/1/08