Form PTO-1594 (Rev. 03/01)

U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office

OMB No. 0651-0027 (exp. 5/31/2002)	24 7
Tab settings	Y Y Y
To the Honorable Commissioner of Patents and Trademarks:	Please record the attached original documents or copy thereof.
1. Name of conveying party(ies):	2. Name and address of receiving party(ies)
McKesson Health Solutions Arizona Inc.	Name: McKesson Corporation
5-6-02	Internal
Individual(s) Association	Address:Law Department 34th floor
General Partnership Limited Partnership	Street Address: One Post Street
Corporation-State	City: San Fran. State: CA Zip: 94104
Other State of Incorporation= Delaware	<u> </u>
	Individual(s) citizenship
Additional name(s) of conveying party(ies) attached?	Association
Nature of conveyance:	General Partnership
	Limited Partnership
✓ Assignment	Corporation-State_Delaware
Security Agreement Change of Name	Other
Other	If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
Execution Date: 07/20/01	(Designations must be a separate document from assignment) Additional name(s) & address(es) attached? Yes No
4. Application number(s) or registration number(s):	
A. Trademark Application No.(s)	B. Trademark Registration No.(s) 2523914;
A. Haddmark Application No.(6)	2377003; 2020138
Additional number(s) at	
Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:
Name:Nina Steinman	
	7 Tablés (27 CER 2 44) \$ 90
Internal Address: McKesson Corporation	7. Total fee (37 CFR 3.41)\$_90
34th floor	Enclosed
O 1.1. 1.33	Authorized to be charged to deposit account
	- 7
One Post Street	8. Deposit account number:
Street Address: One Post Street	8. Deposit account number: 501457 77 78 78 78 78 78 78 78 78
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04104	7: 42 TION
City: San Fran. State: CA Zip: 94104	
DO NOT USE THIS SPACE	
9. Signature.	
Hin	Oberamo -
Nina Steinman	May 3, 2002
Name of Person Signing	Signature Date
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TRADEMARK REEL: 002507 FRAME: 0826

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ANDREW KATZER Z
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