

07-15-2002



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Form PTO-1594

(Rev. 03/01)

OMB No. 0651-0027 (exp. 5/31/2002)

RECORDATION & TRADEMARKS

DEPARTMENT OF COMMERCE  
Trademark Office

Tab settings

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

1. Name of conveying party(ies): **7-10-02**  
 The United States Shoe Corporation  
 44 Harbor Park Drive  
 Port Washington, New York 11050

Individual(s)       Association  
 General Partnership       Limited Partnership  
 Corporation - State - Delaware  
 Other \_\_\_\_\_

Additional name(s) of conveying party(ies) attached?  Yes  No

3. Nature of conveyance:

Assignment       Merger  
 Security Agreement       Change of Name  
 Other \_\_\_\_\_

Execution Date: 6/18/02

2. Name and address of receiving party(ies)  
 Name: The LensCrafters Foundation  
 Internal Address: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Street Address: 8650 Governor's Hill Drive  
 City: Cincinnati State: Ohio Zip: 45249

Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation - State non-profit - OHIO  
 Other \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
(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) 1,973,129  
~~2,096,727~~  
1,979,743  
1,979,742

Additional number(s) attached  Yes  No

5. Name and address of party to whom correspondence concerning documents should be mailed:

Name: Joyce Stone  
 Internal Address: LensCrafters, Inc.  
Legal Department

Street Address: 8650 Governor's Hill Dr.  
 City: Cincinnati State: Ohio Zip: 45249

6. Total number of applications and registrations involved: 4

7. Total fee (37 CFR 3.41) ..... \$ 115.00

Enclosed  
 Authorized to be charged to deposit account

8. Deposit account number: 50-0915

(Attach duplicate copy of this page if paying by deposit account)

DONOT 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.

Joyce Stone  
 Name of Person Signing

Joyce Stone  
 Signature

6/29/02  
 Date

07/12/2002 DBYRNE 00000260 500915 1973129

01 FC:481  
02 FC:482

40.00 CH  
75.00 CH

Mail documents to be recorded with required coversheet information to:  
Commissioner of Patent & Trademarks, Box Assignments  
Washington, D.C. 20231

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**SCHEDULE A**  
**INTELLECTUAL PROPERTY**

<b><u>TRADEMARK</u></b>	<b><u>REGISTRATION DATE</u></b>	<b><u>REGISTRATION NUMBER</u></b>	<b><u>INTL. CLASS</u></b>
GIVE THE GIFT OF SIGHT & DESIGN	5/7/1996	1,973,129	42
GIVE THE GIFT OF SIGHT & DESIGN COLLECTION BOX	9/16/1997	2,096,727	16, 42
GIVE THE GIFT OF SIGHT LENSMAKERS & DESIGN	6/11/1996	1,979,743	42
LENSMAKERS & DESIGN	6/11/1996	1,979,742	42

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GIVE THE GIFT OF SIGHT & DESIGN COLLECTION BOX	3/12/1996	VA 783-549	
GIFT OF SIGHT (SOUND RECORDING)	12/19/1996	SR 254-905	