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

1. Name of conveying party(ies):

DaboAcquisition, Inc.

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

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

3. Nature of conveyance:

- Assignment, Merger, Security Agreement, Change of Name, Other

Execution Date: February 6, 2003

2. Name and address of receiving party(ies)

Name: Clark Material Handling Company

Internal Address: Suite 500

Street Address: 2317 Alumni Park Plaza

City: Lexington State: KY Zip: 40517

- Individual(s) citizenship, Association, General Partnership, Limited Partnership, Corporation-State Delaware, 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) 1467803; 2010572; 2032653; 2085234

Additional number(s) attached Yes No

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

Name: Karen L. Lynd

Internal Address: 3300 National City Tower

Street Address: 101 South Fifth Street

City: Louisville State: KY Zip: 40202

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:

500976

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9. Signature.

Karen L. Lynd Name of Person Signing

Karen L. Lynd Signature

April 22, 2003 Date

Total number of pages (including cover sheet, attachments, and document):

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



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FROM: Karen L. Lynd 502/587-3789 502/540-2270

DATE: April 22, 2003

SUBJECT: Recordation

PAGES: 2 page(s), including cover page.

REPORT TRANSMISSION PROBLEMS TO: Michael M. Bowman 502/587-3543

MESSAGE:

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