

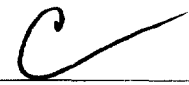
Public Records  
OMB 0651-0027

2002 DEC 13 AM 11:33



REC

102325968  
**TRADEMARKS ONLY**



**FINANCE SECTION**

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

**Submission Type**

New **12-13-02**

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 Effective Date  
Month Date Year

Change of Name

Other

**Conveying Party**

Mark if additional names of conveying parties attached

Name  Execution Date  
Month Day Year

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  Corporation  Association

Corporation  Association

Other

Citizenship/State of Incorporation/Organization

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)

12/31/2002 LWELLER 00000146 1990345

FOR OFFICE USE ONLY

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40.00 DP

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: 002641 FRAME: 0133

**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**

(202) 861-3900

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)**

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| <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"/> |

**Registration Number(s)**

|  |                      |                      |
|--|----------------------|----------------------|
| <input type="text" value="1,990,345"/> | <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 true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Emily C. Sexton, Esq.

Name of Person Signing



Signature

12/13/2002

Date Signed

MAR 03-7-97

03-24-1997

REC'D ACTING. DIV.



100376188

To the Honorable Commissioner of thereof.

of the attached original documents or copies

1. Name of conveying party(ies):

CGI/City Alive Productions, Inc.  
(a corporation of Illinois)

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

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

3. Nature of conveyance:

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

Execution Date: February 28, 1997

2. Name and address of receiving party(ies):

Christian Communications of Chicagoland, Inc.  
30 South Peoria Street  
Chicago, Illinois 60607-2628

- Individual(s) citizenship \_\_\_\_\_
- Association \_\_\_\_\_
- General Partnership \_\_\_\_\_
- Limited Partnership \_\_\_\_\_
- Corporation-State Illinois
- Other: \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
(Designation must be a separate document from Assignment)  
Additional name(s) & addresses attached?  Yes  No

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

1,990,345

Additional numbers attached?  Yes  No

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

Lawrence M. Jarvis  
McAndrews, Held & Malloy, Ltd.  
500 West Madison Street  
34th Floor  
Chicago, Illinois 60661

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 3.41): \$ 40.00

- Enclosed
- Authorized to be charge to deposit account

8. Deposit account number:

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

DO NOT 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.

Signature and Registration Number: [Signature] - 27,341

Date: Mar 4 1997

Name of Person Signing: Lawrence M. Jarvis

Total number of pages including cover sheet, attachments and document: 2

TRADEMARK

REEL: 002641 FRAME: 0135

SERVICE MARK ASSIGNMENT

WHEREAS, CGI/City Alive Productions, a joint venture organized under the laws of the State of Illinois (herein after referred to as "Assignor"), with its principal office and place of business at Suite 1400, 2001 Butterfield Road, Downers Grove, Illinois 60515, is the owner of the service mark TESTIFY which is registered in the United States Patent and Trademark Office under Registration No. 1,990,345 dated July 30, 1996; and

WHEREAS, Christian Communications of Chicagoland, Inc., a corporation organized under the laws of the State of Illinois (hereinafter referred to as "Assignee"), with its principal office and place of business at 30 South Peoria Street, Chicago, IL 60607-2628 is desirous of acquiring said service mark and the registration thereof;

NOW THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, said Assignor does hereby assign and transfer unto the said Assignee, all right, title, and interest in and to the said service mark, together with the goodwill of the business symbolized by the service mark, and the above-identified registration thereof.

CGI/CITY ALIVE PRODUCTIONS

Dated: 2/28/97

By: [Signature]  
Jerry Rose  
Title at CGI/City Alive Productions:  
Vice President

State of IL. )  
City of Chicago ) SS.

Subscribed and sworn before me this 28<sup>th</sup> day of February, 1997.

[Signature]  
Notary Public

My Commission expires 08/26/2000

