

FORM PTO-1594 (Substitute)

**RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY**

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

To the Director of the U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):  
**TUSCARORA INCORPORATED**

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

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

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

Name: SCA NORTH AMERICA – PACKAGING  
DIVISION, INC.

Address: 800 FIFTH AVENUE

City: New Brighton State: PA Zip: 15066

Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation-State Pennsylvania  
 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

3. Nature of conveyance:

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

Execution Date: January 20, 2004

4. Application number(s) or patent number(s)

A. Trademark Application No(s). \_\_\_\_\_

B. Trademark Registration No(s).  
**1638053**

Additional numbers attached?  Yes  No

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

Name: Jody L. Burtner, Senior Paralegal  
REED SMITH LLP

Address: P.O. Box 488

City: Pittsburgh State: PA Zip: 15230

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 2.6(b)(6)): \$ 40.00

Enclosed  
 Authorized to be charged to deposit account 18-0582  
 Charge any deficiency to deposit account

8. Deposit account number:  
18-0582

(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 and copy of the original document.*

Jody L. Burtner, Senior Paralegal                      [Signature]                      May 21, 2004  
 Name of Person Signing                      Signature                      Date

Total number of pages including cover sheet, attachments, and document: 1

Mail documents to be recorded with required cover sheet information to:  
Mail Stop Assignment Recordation Services, Director of the U.S. Patent and Trademark Office,  
P.O. Box 1450, Alexandria, VA 22313-1450

CH \$40.00 180682 1638053

# ReedSmith

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May 21, 2004

**VIA TELEFAX 703-306-5995**

**TO BE RECORDED FIRST**

Director of Patents and Trademarks  
MAIL STOP ASSIGNMENT RECORDATION SERVICES  
P.O. Box 1450  
Alexandria, VA 22313-1450

Re: Recordation of Assignment - Trademarks  
Tuscarora Incorporated To SCA North America – Packaging Division, Inc.  
Our Ref.: 03-261-US

Dear Sir:


Attached are the following for filing in connection with the above-referenced matter:

- 1. A completed Recordation Form Cover Sheet - Trademarks Only, for recordation of a corporate change of name.

The Director is authorized to charge the fee of \$40.00 and any additional payment due in connection with this submission, or to credit any overpayment, to Deposit Account No. 18-0582. A duplicate copy of this authorization is enclosed.

Very truly yours,

REED SMITH LLP

By   
Jody L. Burtner, Senior Paralegal  
to Charles H. Dougherty, Jr., Esq.

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