

FORM PTO-1613A
Expires 09/30/99
OMB 0651-0027

U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

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

Submission Type

- New
- 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 Day Year

- Change of Name
- Other _____

Conveying Party

Mark if additional names of conveying parties attached
Execution Date
Month Day Year

Name Health Forum, Inc.

10 28 1999

Formerly _____

- Individual General Partnership Limited Partnership Corporation Association
- Other _____
- Citizenship/State of Incorporation/Organization Illinois

Receiving Party

Mark if additional names of receiving parties attached

Name American Hospital Association

OBA/AKA/TA _____

Composed of _____

Address (line 1) One North Franklin Street

Address (line 2) _____

Address (line 3) Chicago

City

Illinois

State/Country

60606-3421

Zip Code

- Individual General Partnership Limited Partnership
- Corporation Association
- Other _____

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.)

- Citizenship/State of Incorporation/Organization Illinois

FOR OFFICE USE ONLY

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 (0431-0027), 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

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Expires 06/30/99
349 0831-0077

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U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

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

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)			Registration Number(s)		
<input type="text" value="75346804"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="75347610"/>	<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"/>	<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:

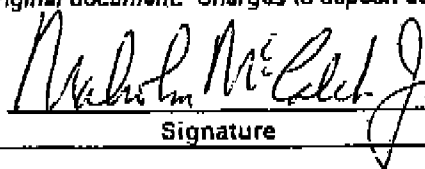
Yes

No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Malcolm McCaleb, Jr.



11/16/99

Name of Person Signing

Signature

Date Signed

TRADEMARK

REEL: 003307 FRAME: 0190

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

05/09/2006
900048504

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment for Reel 001875 Frame 0586 to correct entity type

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Health Forum, Inc.	FORMERLY Healthcare InfoSource, Inc.	03/16/1999	CORPORATION:

RECEIVING PARTY DATA

Name:	American Hospital Association
Street Address:	One North Franklin
City:	Chicago
State/Country:	ILLINOIS
Postal Code:	60606
Entity Type:	Illinois not-for-profit Corporation:

PROPERTY NUMBERS Total: 2

Property Type	Number	Word Mark
Registration Number:	2369061	HEALTHCARE QUICKDISC
Registration Number:	2367381	AHA GUIDE

CORRESPONDENCE DATA

Fax Number: (312)832-4700
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
Phone: 312-832-4500
Email: MJBrown@foley.com
Correspondent Name: Marshall J. Brown
Address Line 1: 321 North Clark Street
Address Line 2: Suite 2900
Address Line 4: Chicago, ILLINOIS 60610

NAME OF SUBMITTER:	Marshall J. Brown
Signature:	/marshall j. brown/
Date:	05/09/2006

OP \$65.00 2369061

Total Attachments: 2
source=assignment#page1.tif
source=assignment#page2.tif

United States

ASSIGNMENT OF TRADEMARKS

WHEREAS, Health Forum, Inc., an Illinois corporation, having its principal place of business at One North Franklin Street, Chicago, Illinois 60606-3421 ("Assignor"), is the sole and exclusive owner of the Trademarks described in the Schedule attached hereto and made a part hereof, as well as the business associated with the products to which the trademarks pertain; and

WHEREAS, American Hospital Association, an Illinois corporation, having its principal place of business at One North Franklin Street, Chicago, Illinois 60606-3421 ("Assignee"), desires to acquire the entire right, title and interest in, to and under the said Trademarks and any Registrations and Applications for Registration thereof, together with that portion of Assignor's business which has developed the products to which the Trademarks pertain;

NOW, THEREFORE, for and in consideration of the sum of One Dollar (\$1.00), and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, said Assignor does hereby sell, transfer, convey and assign to said Assignee the entire right, title and interest in, to and under said Trademarks and any Registrations and Applications for Registration thereof ("Trademarks"), together with the entire business and goodwill of the business associated with and symbolized by the Trademarks, together with all rights and privileges granted and secured thereby, including the right to sue and recover for any past infringement, said rights to be held and enjoyed by said Assignee, for its own use and benefit and for the use and benefit of its successors, assigns or other legal representatives as fully and entirely as the same would have been held and enjoyed by said Assignor if this Assignment and sale had not been made. Assignor further agrees to execute any and all documents and do any such further acts that shall be required in order for Assignee to secure such rights.

AND, said Assignor hereby covenants that it has full right to convey the entire interest herein assigned, along with that portion of its business which has developed the products to which the Trademarks pertain.

IN TESTIMONY WHEREOF, Assignor has executed this Assignment by its proper officers thereunto duly authorized, this 28th day of October, 1999 at Chicago, IL.

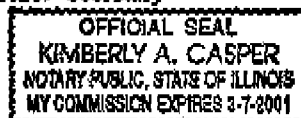
HEALTH FORUM, INC.



Name: James A. Henderson

Title: Secretary

Subscribed and sworn
to before me this 28th
day of October, 1999.




Notary Public

ACCEPTED BY AMERICAN HOSPITAL ASSOCIATION



Name: James A. Henderson

Title: Assistant Secretary

United States

SCHEDULE

Mark	Appl. No.	Appl. Date
HEALTHCARE	75/346,804	08/08/97
QUICKDISC		
AHA GUIDE	75/347,610	08/26/97

011.263912.1