

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	NUNC PRO TUNC ASSIGNMENT
EFFECTIVE DATE:	10/01/2008

**CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
McKesson Corporation		11/11/2008	CORPORATION: DELAWARE

**RECEIVING PARTY DATA**

Name:	MCKESSON PHARMACY SYSTEMS LLC
Street Address:	One Post Street
Internal Address:	33rd Floor
City:	San Francisco
State/Country:	CALIFORNIA
Postal Code:	94104
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE

**PROPERTY NUMBERS Total: 3**

Property Type	Number	Word Mark
Serial Number:	73744347	DATASTAT
Serial Number:	73470304	DATASTAT
Serial Number:	78328268	ESIG CAPTUREPLUS

**CORRESPONDENCE DATA**

Fax Number: (404)338-5138  
*Correspondence will be sent via US Mail when the fax attempt is unsuccessful.*  
 Phone: 4043382387  
 Email: odessa.roberts@mckesson.com  
 Correspondent Name: Odessa Roberts, McKesson Corporation  
 Address Line 1: 5995 Windward Parkway  
 Address Line 2: ATHQ-3100  
 Address Line 4: Alpharetta, GEORGIA 30005

NAME OF SUBMITTER:	Odessa Roberts
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**TRADEMARK**

**900153922**

**REEL: 004143 FRAME: 0624**

**CH \$90.00 73744347**

Signature:	/odessa roberts/
Date:	02/04/2010
Total Attachments: 6 source=McKesson Corp-McKesson Pharmacy#page1.tif source=McKesson Corp-McKesson Pharmacy#page2.tif source=McKesson Corp-McKesson Pharmacy#page3.tif source=McKesson Corp-McKesson Pharmacy#page4.tif source=McKesson Corp-McKesson Pharmacy#page5.tif source=McKesson Corp-McKesson Pharmacy#page6.tif	

**ASSIGNMENT OF TRADEMARKS (NUNC-PRO TUNC)**

THIS ASSIGNMENT, made by McKesson Corporation, having its principal place of business at One Post Street, 33<sup>rd</sup> Floor, San Francisco, CA 94104, hereinafter referred to as Assignor;

WITNESSETH: That,

WHEREAS, as shown by the records of the United States Patent and Trademark Office, Assignor owns or has previously acquired all right, title, and interest in and to the trademarks and United States trademark registrations identified on the attached Schedule (all hereinafter referred to as the "Trademarks"); and,

WHEREAS, McKesson Pharmacy Systems LLC, having its principal place of business at One Post Street, 33<sup>rd</sup> Floor, San Francisco, CA 94104, hereinafter referred to as Assignee, is desirous of acquiring the entire right, title, and interest in and to said Trademarks; and

WHEREAS, the parties have agreed to the Assignment hereinafter set forth;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged:

1. Assignor hereby sells, assigns, transfers and conveys to Assignee, all right, title and interest in and to the Trademarks, if any, including all registrations and applications for registrations therefor, and the goodwill associated with the use of and symbolized by the Trademarks, if any, as part of the entire business or portion therefor to which the Trademarks pertain. Further, Assignor hereby assigns, transfers and sets over unto Assignee all right, if any, to sue for and to collect damages, profits and other relief for any past infringement of the Trademarks.
2. At the request of Assignee, Assignor shall execute and deliver to Assignee any and all additional documents as Assignee may reasonably require to vest title to the Trademarks in Assignee and/or to carry out the intent of this Assignment.

This Assignment of Trademarks is made NUNC PRO TUNC, dating back and effective as of October 1, 2008.

IN WITNESS WHEREOF, the Assignor has caused this assignment to be executed this 11th day of November, 2008.

McKesson Corporation

By: Anne J. Shuford (SEAL)

Its: Assistant Secretary  
Assistant Secretary

STATE OF California)

COUNTY OF San Francisco)

I, Karen H. Pimer, a Notary Public for said County and State, do hereby certify that Anne J. Shuford, personally came before me this day and acknowledged that she is Assistant Secretary of McKesson Corporation and acknowledged, on behalf of McKesson Corporation, the due execution of the foregoing instrument.

Witness my hand and official seal, this the 11th day of November, 2008.

(Official Seal)

Karen H. Pimer  
Notary Public

My commission expires: 10/19/2010

*Please see attached Acknowledgment.  
Karen H. Pimer, Notary Public.*

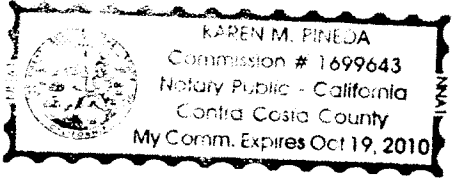
**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

State of California

County of San Francisco }

On Nov 11, 08 before me, Karen M. Pineda, Notary Public

personally appeared Aime Shufford, Assistant Secretary



who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.  
Signature Karen M. Pineda  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

*Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.*

**Description of Attached Document**

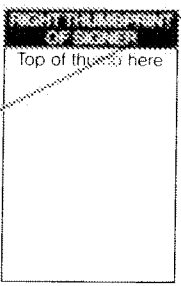
Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

- Signer's Name: \_\_\_\_\_
- Individual
  - Corporate Officer — Title(s): \_\_\_\_\_
  - Partner —  Limited  General
  - Attorney in Fact
  - Trustee
  - Guardian or Conservator
  - Other: \_\_\_\_\_



Signer Is Representing: \_\_\_\_\_

- Signer's Name: \_\_\_\_\_
- Individual
  - Corporate Officer — Title(s): \_\_\_\_\_
  - Partner —  Limited  General
  - Attorney in Fact
  - Trustee
  - Guardian or Conservator
  - Other: \_\_\_\_\_



Signer Is Representing: \_\_\_\_\_

IN WITNESS WHEREOF, the Assignee has caused this assignment to be executed this 11th day of November, 2008.

McKesson Pharmacy Systems LLC

By: *Anne J. Shuford* (SEAL)  
Anne J. Shuford

Its: *Assistant Secretary*  
Assistant Secretary

STATE OF *California* )

COUNTY OF *San Francisco* )

I, *Kare n. Pineda*, a Notary Public for said County and State, do hereby certify that Anne J. Shuford, personally came before me this day and acknowledged that she is Assistant Secretary of McKesson Pharmacy Systems LLC and acknowledged, on behalf of McKesson Pharmacy Systems LLC the due execution of the foregoing instrument.

Witness my hand and official seal, this the *11th* day of *November*, 2008.

(Official Seal)

*Kare n. Pineda*  
Notary Public

My commission expires: *10/19/2010*

*Please see attached Acknowledgment -  
Kare n. Pineda, Notary Public.*

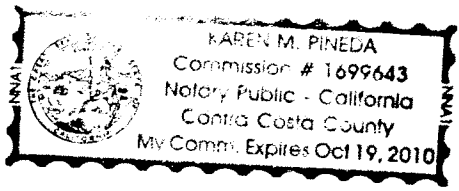
**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

State of California

County of San Francisco }

On 11/11/08 before me, Karen M. Pineda, Notary Public  
Date Here Insert Name and Title of the Officer

personally appeared Anne Shuffel, Assistant Secretary  
Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal  
Signature Karen M. Pineda  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

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Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

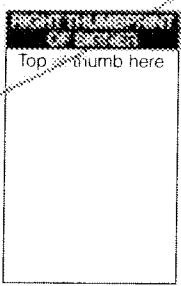
Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

- Individual
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_



Signer's Name: \_\_\_\_\_

- individual
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_



**SCHEDULE**

<b>Trademark</b>	<b>Registration Number</b>	<b>Registration Date</b>
DATASTAT	1,535,707	4/21/89
DATASTAT	1,437,107	4/18/87
ESIG CAPTUREPLUS	2,966,527	7/12/05