



10-20-1999



10-12-1999

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RECORDATION FORM COVER SHEET

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10-12-99

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Submission Type

- New
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Document ID #
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Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
- Merger
- Change of Name
- Other

Effective Date
Month Day Year
08 25 99

Conveying Party

Mark if additional names of conveying parties attached

Name

Execution Date
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08 25 99

Formerly

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

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- Other

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FOR OFFICE USE ONLY

10/20/1999 MTHA11 00000688 201112 1525641

01 FC:401 40.00 CR
02 FC:402 100.00 CR

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REEL: 001975 FRAME: 0993

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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"/>	<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" value="1,525,641"/>	<input type="text" value="1,815,568"/>	<input type="text"/>
<input type="text" value="1,528,216"/>	<input type="text" value="2,105,528"/>	<input type="text"/>
<input type="text" value="1,804,437"/>	<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.)

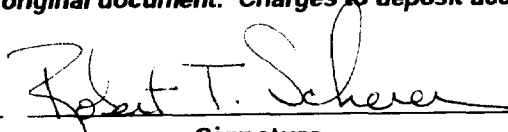
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Authorization to charge additional fees: Yes No

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.

Robert T. Scherer
Name of Person Signing


Signature

10/5/99
Date Signed

SCHEDULE

<u>Mark</u>	<u>Registration No.</u>	<u>Granted</u>	<u>Class</u>
AMERICAN HEALTH	1,525,641	February 21, 1989	16
AMERICAN HEALTH and Design	1,528,216	March 7, 1989	16
AMERICAN HEALTH FOR WOMEN	2,105,528	October 14, 1997	16
AMERICAN HEALTH CLUB MARKETING and Design	1,815,568	January 4, 1994	35
AMERICAN HEALTH FITNESS OF BODY AND MIND and Design	1,804,437	November 16, 1993	16