

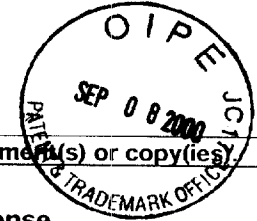
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RECORDATION FORM COVER SHEET
TRADEMARKS ONLY



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

Submission Type

- New
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Document ID # _____
- Correction of PTO Error
Reel # _____ Frame # _____
- Corrective Document
Reel # _____ Frame # _____

Conveyance Type

- Assignment License
 - Security Agreement Nunc Pro Tunc Assignment
 - Merger Change of Name
 - Other _____
- Effective Date
Month Day Year

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name PASCO, Inc.

Formerly Information Management Group, Inc.

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

Receiving Party

Mark if additional names of receiving parties attached

Name Patient Focus Systems, Inc.

DBA/AK/A/T/A _____

Composed of _____

Address (line 1) 1140 Terex Road

Address (line 2) _____

Address (line 3) Hudson OH 44236

- Individual General Partnership Limited Partnership Corporation Association
 - Other _____
 - Citizenship/State of Incorporation/Organization Ohio
- 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.)

FOR OFFICE USE ONLY

09/19/2000 MTHA11 00000426 2186953

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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"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2,186,953"/>	<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"/>	<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.

Howard S. Essner

7/25/06

Name of Person Signing

Signature

Date Signed

**SCHEDULE A
TO ASSIGNMENT OF TRADEMARKS
BETWEEN
PASCO, INC.
AND
PATIENT FOCUS SYSTEMS, INC.**

Trademark/ Trade Name	Filing Office	Filing Number and Date
Access Bed Control	US Patent and Trademark Office	RN 2,199,305 TM 75/210,022 Filed 12/9/96; Issued 10/27/98
Patient Focus Systems	US Patent and Trademark Office	RN 2,186,953 TM 75/210,021 Filed 12/9/96; Issued 10/27/98
	Ohio Secretary of State	Trade Name Registration RN 238516; Filed 1/10/97
Patient Transport System	US Patent and Trademark Office	RN 2,271,910 TM 75/477,533 Filed 5/1/98; Issued 8/24/99
Patienttransport Systems (with Logo)	US Patent and Trademark Office	RN 1,969,354 TM 74/558,241 Filed 8/8/94; Issued 4/23/96
We measure quality one trip at a time	US Patent and Trademark Office	RN 1,991,885 TM 74/558,240 Filed 8/8/94; Issued 8/6/96