

Exhibit 63

SEPARATION CHECKLIST		
Employee Information		
Morris, Mark	7/15/16	Personal
Last Name, First Name	Separation Date	Reason for leaving
Location: <input checked="" type="checkbox"/> CDX <input type="checkbox"/> CDXA <input type="checkbox"/> Spherix		<input checked="" type="checkbox"/> Voluntary <input type="checkbox"/> Involuntary*
Before Employee's Last Day of Employment		
Human Resources <input checked="" type="checkbox"/> Schedule Exit Interview <input checked="" type="checkbox"/> Prepare 401(k) Termination Notice & Materials <input checked="" type="checkbox"/> Prepare MOO conversion/portability documents <input checked="" type="checkbox"/> Stock Option Summary (if applicable) <input type="checkbox"/> Other: _____	Accounting/Finance <input checked="" type="checkbox"/> Calculate Vacation hours for final paycheck <input checked="" type="checkbox"/> Calculate final expenses to be reimbursed (if applicable) <input checked="" type="checkbox"/> Final Expense Reports submitted (if applicable) <input checked="" type="checkbox"/> Check final balance on corporate credit card <input checked="" type="checkbox"/> Final Time-Sheet submitted	
Facilities		
<input checked="" type="checkbox"/> Employee Status Change Form submitted to IT	Date, employee's network access will close: <u>7-15-16</u>	
Last Day of Employment		
Advise and provide employee with the following items:		
COBRA provisions for Health and FSA Benefits <input type="checkbox"/> COBRA enrollment materials directly from CBIZ COBRA - 60 days to elect coverage - COBRA in effect for 18 months <i>Cobra Total: 1,401.57</i>	Non-Disclosure Agreement <input checked="" type="checkbox"/> Explain / Remind provisions of Non-Disclosure <input checked="" type="checkbox"/> Retrieve confidential information - Employee Handbook	
401(k) Materials <input checked="" type="checkbox"/> Distribution Form/Special Tax provisions <input checked="" type="checkbox"/> Acknowledgement <input checked="" type="checkbox"/> 401(k) loan repayment* (*when applicable)	Stock Options (if applicable) <input type="checkbox"/> 30 days to submit the form to exercise	
Last Paycheck <input checked="" type="checkbox"/> Handed to employee <input type="checkbox"/> Mailed after separation date on: _____ Via: _____	Exit Interview <input checked="" type="checkbox"/> Completed <input checked="" type="checkbox"/> Resignation form completed <input type="checkbox"/> Declined <input type="checkbox"/> Resignation letter received	
Address Verification <input checked="" type="checkbox"/> Address remains the same <input type="checkbox"/> New Address: _____	Personal Belongings <input type="checkbox"/> Provided to employee <input type="checkbox"/> Witnessed collection	
Retrieves, cancel, or secure the following items:		
Company Equipment/System Usage <input checked="" type="checkbox"/> Laptop / Docking Station returned <i>no connectivity</i> <input checked="" type="checkbox"/> Cancel dept. network/email account & Electronic files <input checked="" type="checkbox"/> Delete account passwords <input checked="" type="checkbox"/> Phone <input type="checkbox"/> Other items not specified in this list: _____	Security <input checked="" type="checkbox"/> Security system fob returned <input checked="" type="checkbox"/> Office Keys returned # of keys <u>2</u> <input checked="" type="checkbox"/> Desk/File Keys returned # of keys <u>2</u>	
Finance <input checked="" type="checkbox"/> Corporate Credit Card returned		
Employee Signature: <u>Mark Morris</u>	Date: <u>7-15-16</u>	
HR / Manager Signature: <u>Joy [Signature]</u>	Date: <u>7-15-16</u>	

Additional Comments (for manager's only):

