REGISTRATION NUMBER

DVH 0311

pages

Page 1 of

	9	DATE OF REG	DATE OF REGISTRATION/PUBLICATION		
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THE STREET WAS SOURCED AND	DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARA	ATE CONTINUATIO	N SHEET. (F	orm D-VH/C	ON)
TITLE	CROWNLINE 252EX DECKBOAT				
					the continue
DESIGN (Check here it this is a single design.	f	esign. L CONFIGURA:	CION AND	SHAPE	
Check here if registering more than one design. Use Form D-VH/CON for additional	If this design is derived from an earlier design, describe how that design h	nas been revised, a	dapted, or re	earranged.	
designs. DESIGNER(S)	CPOUNT THE DOADS THE	r may be given ins l(2) the individual a the employer's nar	stead of the d authorship of me.	lesigner(s) the design is	if, (1) th s difficu
OWNER, IF NOT DESIGNER(S)	If the owner is different from the designer(s) or employer named above, proving Name: Address:	ide the name and a	ddress of the	owner:	
PRIORITY CLAIM	designs of owners who are citizens of the United States, or to persons filing applications in the United States, similar protection to that afforded in 17 U.S.C. chapter 13? Yes No Serial No:	plication:		pplication:	ATTACAS ASSESSES
DATE MADE PUBLIC	Was this design made public before the date of application? Yes No No If yes, on what date? JANUARY 26 2006 Month Day Year		EIVED 296 €D 106	不 多 化中型异构编码	
gana especial de la companya de la c	• Complete all applicable spaces (numbers 7 -9) on the reverse side of this possible. • See detailed instructions. • Sign the form at section 9.		er Skriger (*) Skriger	DO NOT WAI	ITE HERE

CERTIFICATION AND	SWORN STATEMENTS
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	CHECKED BY					
		CORRESPONDENC	CE	FOR		
		□ Yes		COPYRIGH OFFICE USE		
DO NOT V	VRITE AROVE THIS LINE IS YOUNGED HOS			ONLY		
TEORN SALE SARLES TEORNESSE TEORNESS	Please provide the name and address of t Name: KEVIN J. RIEM	he person to whom correspondence regar	ON SHEET. (Form D-VH/CON) rding this application may be d	irected:		
CONTACT PERSON	Address: 11884 COUNTRY CLUB	ROAD	•			
ERSON	WEST FRANKFORT, IL	62896 Email address	kriem@crownline.co	om		
GOSTAN MAGON TO CONTRACTORISM	FAX number 618-932-6916	Doubles	618 937-6426			
2	Give the name and account number if the re	UNITED STREETS AND THE PROPERTY OF STREET STREETS AND ASSOCIATION OF THE PROPERTY OF THE PROPE		vright Office		
()	Name of Account:			jugat office.		
DEPOSIT ACCOUNT	Account number:					
SWORN STA	DECLARATION: The undersigned, as the applicant or the applicant's duly appointed agent or representative, being hereby warned that willful false statements are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001, and that such willful false statements may jeopardize the validity of this application or any resulting registration, hereby declares to the best of his or her knowledge and belief: (1) that the design has been fixed in a useful article; (2) that the design is original and was created by the designer(s), or employer if applicable, named in the application; (3) that those aspects of the design for which registration is sought are not protected by a design patent; (4) that the design has not previously been registered on behalf of the applicant or applicant's predecessor in title; and (5) that the applicant is the person entitled to protection and to registration under chapter 13 of title 17, United States Code. Complete if applicable: The design has been made public with a design notice as prescribed by 17 U.S.C. §1306. Following is the exact form of the design notice: ADHESIVE LABEL W/"PROTECTED DESIGN", 2006, CROWNLINE BOATS, INC. Where on the useful article is the design notice located? PORT AFT EXTERIOR					
	KEVIN J. RIEM	she is properly authorized to execute this a	application on behalf of the apple 1966 PRESIDENT & GENERA	·		
_	Print or type name (618) 937-6426 (618) elephone number FAX number	Position	n or Title iem@crownline.com			
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FORM D-VH

will be mailed in window envelope to this address:

CROWNLINE BOATS, INC. ATTN: KEVIN J. RIEM Number/Street/Apt ▼ 11884 COUNTRY CLUB ROAD City/State/ZiP ▼ WEST FRANKFORT, IL 62896

Complete all necessary spaces
Sign your application in space 9
SEND ALL 3 ELEMENTS
IN THE SAME PACKAGE:
Application form
Nonrefundable illing fee in check or money order payable to Register of Copyrights
Design material

MAIL TO:
Dept. D-VH
Vessel Hull Registration
P.O. Box 71380
Washington, D.C. 20024-1380

17 U.S.C. \$1327. Penalty for false representation. "Whoever knowingly makes a false representation materially affecting the rights obtainable under this chapter for the purpose of obtaining registration of a design under this chapter shall pay a penalty of not less than \$500 and not more than \$1,000, and any rights or privileges that individual may have in the design under this chapter shall be forfeited."





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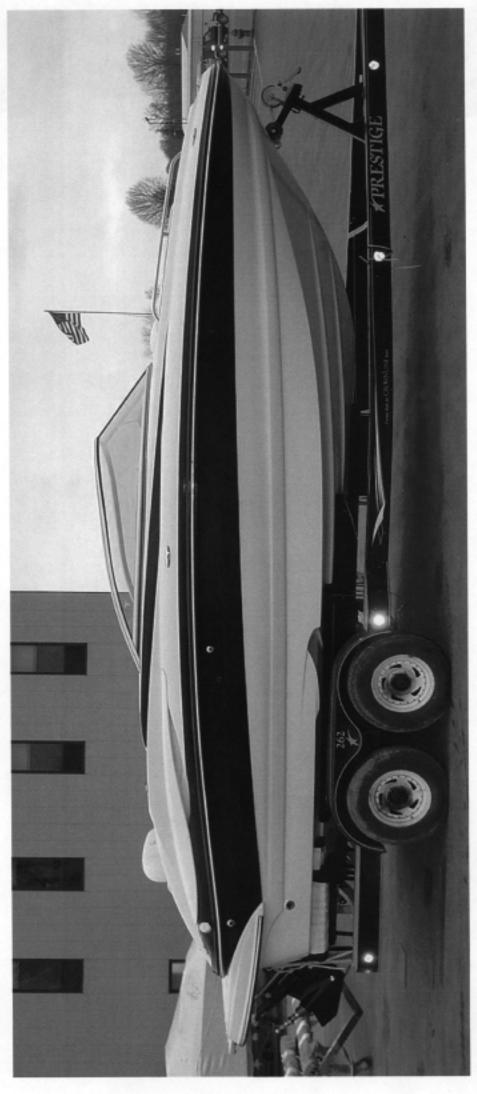


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