

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: State University of New York, University at Albany

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): University at Albany
SUNY Albany

Address of Service Provider: 1400 Washington Avenue, Albany, New York 12222

Name of Agent Designated to Receive Notification of Claimed Infringement: Christine E. Haile

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):
Office of the CIO, University at Albany, 1400 Washington Avenue, UAB 400, Albany, NY 12222

Telephone Number of Designated Agent: (518) 437-4920

Facsimile Number of Designated Agent: (518) 437-4927

Email Address of Designated Agent: chaile@uamail.albany.edu

Name of the Designating Service Provider: _____
Date: 12/5/01

Typed or Printed Name and Title: Christine E. Haile, Chief Information Officer (Interim)

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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