

**Amended Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: University of Kansas

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

Address of Service Provider: Lawrence, KS 66045

Name of Agent Designated to Receive Notification of Claimed Infringement: Denise Stephens

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):
University of Kansas, 223 Strong Hall, 1450 Jayhawk Blvd, Lawrence, KS 66045

Telephone Number of Designated Agent: 785-864-4999

Facsimile Number of Designated Agent: 785-864-0360

Email Address of Designated Agent: Copyright@ku.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: University of Kansas, April 20, 1999

Signature of Officer or Representative of the Designating Service Provider: _____ Date: Apr. 24, 2007

Typed or Printed Name and Title: Denise Stephens, Vice Provost for Information Services and CID

Note: This Amended Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.



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