

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

**Full Legal Name of Service Provider:** Ulster County Community College

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

**Address of Service Provider:** Stone Ridge, NY 12484

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Lawrence S. Berk

**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):**  
Macdonald Dewitt Library , Ulster County Community College  
Stone Ridge, New York 12484

**Telephone Number of Designated Agent:** 914-687-5215

**Facsimile Number of Designated Agent:** 914-687-5220

**Email Address of Designated Agent:** berkl@sunyulster.edu

**Signature of Officer or Representative of the Designating Service Provider:**

**Date:** 6/4/99

**Typed or Printed Name and Title:** Lawrence S. Berk  
Director of Library and Information Services

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

**RECEIVED**

**JUN 11 1999**

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