

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

**Full Legal Name of Service Provider:** University of Hawaii

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

**Address of Service Provider:** 2444 Dole Street, Honolulu, HI 96822

**Name of Agent Designated to Receive Notification of Claimed Infringement:** David Lassner

**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):

Information Technology Services, 2532 Correa Road, Bldg. 37,  
Honolulu, HI 96822

**Telephone Number of Designated Agent:** (808) 956-3501

**Facsimile Number of Designated Agent:** (808) 956-5025

**Email Address of Designated Agent:** dmca-agent@hawaii.edu

**Signature of Officer or Representative of the Designating Service Provider:** \_\_\_\_\_  
Date: 11/17/98

**Typed or Printed Name and Title:** David Lassner, Director of Information  
Technology

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

**RECEIVED**

**NOV 24 1998**

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