

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

Full Legal Name of Service Provider: Westelcom CLEC, Inc.

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

Address of Service Provider: 17 North Main Street, Westport, New York 12993

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael R. forcier, Esq.

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):

Westelcom, Michael R. forcier, Esq., Corp. Counsel
130 Park Place, Watertown, New York 13601

Telephone Number of Designated Agent: 315-785-2620

Facsimile Number of Designated Agent: 315-786-8498

Email Address of Designated Agent: mike.forcier@wtm.Westelcom.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 4/30/03

Typed or Printed Name and Title: Michael R. Forcier, Esq.
Corporate Counsel/Business Development Director

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.**

RECEIVED

MAY 13 2003

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