

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

Full Legal Name of Service Provider: Wittenberg University

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

Address of Service Provider: 200 West Ward St, Springfield, OH, 45501-0720

Name of Agent Designated to Receive Notification of Claimed Infringement: Joseph Deck

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):
Computing Center, Wittenberg University, 200 West Ward St
Springfield, OH, 45501-0720

Telephone Number of Designated Agent: 937 525-3800

Facsimile Number of Designated Agent: 937 327-7372

Email Address of Designated Agent: jdeck@wittenberg.edu

Signature of Officer or Representative of the Designating Service Provider: _____
Date: Oct 2 01

Typed or Printed Name and Title: Joseph G. Deck
Director of Computing Services

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

RECEIVED

OCT 25 2001
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