

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Marist College

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

Address of Service Provider: 290 North Rd, Poughkeepsie, NY 12601

Name of Agent Designated to Receive Notification of Claimed Infringement: A. Harry Williams

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):
290 North Rd, Poughkeepsie, NY 12601

Telephone Number of Designated Agent: 914-575-3579

Facsimile Number of Designated Agent: 914-471-6213

Email Address of Designated Agent: Harry.Williams@Marist.edu

Signature of Officer _____
Date: March 31, 1999

Signature of the Designating Service Provider:
Date: March 31, 1999

✓ Typed or Printed Name and Title: A. HARRY WILLIAMS
DIRECTOR OF TECH NOLOGY

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

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