

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

Full Legal Name of Service Provider: Mon-Cre Telephone Cooperative, Inc.

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

Address of Service Provider: 227 Main Street (PO Box 125) Ramer, AL. 36069

Name of Agent Designated to Receive Notification of Claimed Infringement: Tracy Woods

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):

NRTC 2121 Cooperative Way Herndon, Virginia 20171-4542

Telephone Number of Designated Agent: (703) 464-5219

Facsimile Number of Designated Agent: (703) 464-5300

Email Address of Designated Agent: ispwebmaster@trueband.net

Signature of Officer or Representative of the Designating Service Provider: _____
Date: July 30, 2003

Typed or Printed Name and Title: Gerald McGee
General Manager

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

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