

Interim Designation of Agent to Receive Notification
of Claimed Infringement

Full Legal Name of Service Provider: American Trauma Society

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

Address of Service Provider: 7611 South Osborne Road, Suite 202
Upper Marlboro, Maryland 20772

Name of Agent Designated to Receive
Notification of Claimed Infringement: Harry Teter

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): 7611 South Osborne Road, Suite 202
Upper Marlboro, Maryland 20772

Telephone Number of Designated Agent: (301) 574-4300

Facsimile Number of Designated Agent: (301) 574-4301

Email Address of Designated Agent: HTeter@amtrauma.org

Signature of ~~Officer~~ Representative of the Designating Service Provider:

Date: 4-6-09

Typed or Printed Name and Title: Harry Teter, Executive
Director

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.

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