

Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: MEDICAL College of Georgia

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

http://www.mcq.edu

Address of Service Provider: Augusta, GA. 30912-4400

Name of Agent Designated to Receive Notification of Claimed Infringement: MARILEE CREELAN

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):

MEDICAL College of Georgia
AB-241 AUGUSTA, GA 30912-4400

Telephone Number of Designated Agent: 706-721-9910

Facsimile Number of Designated Agent: 706-721-6006

Email Address of Designated Agent: MCREELAN@mail.mcq.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office:

Signature of _____
_____ Designating Service Provider to: 6/29/00

Typed or Printed Name and Title: MARILEE CREELAN, MLS, AHIP,
HEAD, (Library) COLLECTIONS Services

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

RECEIVED

JUN 29 2000

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114-66224

