

Interim Designation of Agent to Receive Notification  
of Claimed Infringement

Full Legal Name of Service Provider: MIDWEST EMPLOYERS  
CASUALTY COMPANY

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

Address of Service Provider: 14755 NORTH OUTER 40 DR. CHESTERFIELD, MO 63017

Name of Agent Designated to Receive  
Notification of Claimed Infringement: PETER SHAW

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):  
14755 NORTH OUTER 40 DR. SUITE 300 CHESTERFIELD, MO  
63017

Telephone Number of Designated Agent: 636-449-7000

Facsimile Number of Designated Agent: 636-449-7199

Email Address of Designated Agent: pshaw@mwecc.com

Signature ~~of~~ Representative of the Designating Service Provider:  
Date: SEPT 13, 2004

Typed or Printed Name and Title: PETER SHAW CHIEF FINANCIAL OFFICER

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

RECEIVED

SEP 17 2004

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