

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

Full Legal Name of Service Provider: Vernon Communications LLC

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

Address of Service Provider: 103 N Main St, P.O. Box 92, Westby, WI 54667

Name of Agent Designated to Receive Notification of Claimed Infringement: Rodney Olson

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):
103 N Main St, P.O. Box 92, Westby, WI 54667

Telephone Number of Designated Agent: 608-634-3136

Facsimile Number of Designated Agent: 608-634-2000

Email Address of Designated Agent: rolson@vermontel.com

Signature of Agent or Representative of the Designating Service Provider: _____

Date: 12/19/01

Typed or Printed Name and Title: Rodney Olson, President

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

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RECEIVED

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