

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

**Full Legal Name of Service Provider:** Southern Polytechnic State University

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

**Address of Service Provider:** 1100 South Marietta Parkway, Marietta, GA 30060-2896

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Steven Vincent, Head of Reference

**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):  
Lawrence V. Johnson Library, Southern Polytechnic State University  
1100 South Marietta Parkway, Marietta, GA 30060-2896

**Telephone Number of Designated Agent:** 770-528-7471

**Facsimile Number of Designated Agent:** 770-528-7207

**Email Address of Designated Agent:** svincen1@spsu.edu

*Signature of Officer* \_\_\_\_\_ *Representative* of the Designating Service Provider:  
Date: June 1, 2000

**Typed or Printed Name and Title:** Lisa A. Rossbacher, Ph.D., 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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