

Interim Designation of Agent to Receive Notification
of Claimed Infringement

Full Legal Name of Service Provider: SHELBY STATE COMMUNITY COLLEGE

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

Address of Service Provider: 737 UNION AVENUE, MEMPHIS, TN 38174-0568

Name of Agent Designated to Receive Notification of Claimed Infringement: VIVIAN STEWART

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):
737 UNION AVE., P.O. BOX 40568, MEMPHIS, TN 38174-0568

Telephone Number of Designated Agent: (901) 544-5135

Facsimile Number of Designated Agent: (901) 544-5141

Email Address of Designated Agent: VSTEWART@SSCC.CC.TN.US

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 6/28/99

Typed or Printed Name and Title: DWIGHT L. JOHNSON
VICE PRESIDENT FOR BUSINESS AND FINANCE

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

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RECEIVED

JUL 27 1999
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