

Interim Designation of Agent to Receive Notification
of Claimed Infringement

Full Legal Name of Service Provider: Western Washington University

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

Address of Service Provider: 516 High Street, Bellingham, WA 98225

Name of Agent Designated to Receive
Notification of Claimed Infringement: John D. Lawson

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):
516 High Street, Bellingham, WA 98225-9033

Telephone Number of Designated Agent: 360-650-3917

Facsimile Number of Designated Agent: 360-788-0808

Email Address of Designated Agent: dmca@wwu.edu

Signature of ~~Officer~~ Representative of the Designating Service Provider: _____
Date: 7/7/2008

Typed or Printed Name and Title: John D. Lawson, Vice Provost for Information Technology

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.

Mail the form to:

Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024

SEARCHED 09.03/2008

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