

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: _____
Ozarks Technical Community College

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

Address of Service Provider: 1001 E. Brower, P. O. Box 5958, Springfield, MO 65801

Name of Agent Designated to Receive Notification of Claimed Infringement: _____
Brian King

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):

P. O. Box 5958
1001 E. Brower
Springfield, MO 65801

Telephone Number of Designated Agent: _____ (417) 895-7077

Facsimile Number of Designated Agent: _____ (417) 895-7366

Email Address of Designated Agent: _____ bking@emh1.etc.cc.mo.us

Signature of Officer or Representative of the Designating Service Provider: _____
Date: March 26, 1999

Typed or Printed Name and Title:
Brian King
Dean of Institutional Development

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

Mail form to: Copyright GC/I&R, P.O. Box 70400, Southwest Station, Washington, D.C. 20024.

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