

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

Full Legal Name of Service Provider: The Hockaday School

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

Address of Service Provider: 11600 Welch Rd. Dallas, TX
75229

Name of Agent Designated to Receive Notification of Claimed Infringement: Amy Spence

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):

11600 Welch Rd
Dallas, TX 75229

Telephone Number of Designated Agent: 214.363.6311

Facsimile Number of Designated Agent: 214.360.6578

Email Address of Designated Agent: aspence@mail.hockaday.org

Name of Agent Designated to Receive Notification of Claimed Infringement: _____
Date: 5.11.02

Type or Printed Name and Title: Amy Spence
Director of Alumnae Relations

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.**

RECEIVED

OCT 03 2002

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