

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

Full Legal Name of Service Provider: Horry-Georgetown Technical College

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

Address of Service Provider: 2050 Highway 501 Conway, SC 29526

Name of Agent Designated to Receive Notification of Claimed Infringement: Laura Brooks Hogue

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):
2050 Highway 501 East
Conway, SC 29526

Telephone Number of Designated Agent: (843)349-5242

Facsimile Number of Designated Agent: (843)347-4207

Email Address of Designated Agent: hogue@hor.tec.sc.us

Signature of _____ of the Designating Service Provider:

Date: 2/17/2001

Typed or Printed Name and Title: Dr. E. Timothy Lightfield, President

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

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