## INTERIM DESIGNATION OF AGENT TO RECEIVE NOTIFICATION OF CLAIMED INFRINGEMENT

Note: This Interim Designation must be accompanied by a \$20 filing fee made payable to the Register of Copyrights. Please mail this form to: Copyright GC/I&R, P.O. Box 70400, Southwest Station, Washington, D.C. 20024

Full Legal Name of Service Provider: Haskell County
Foster Parent Assoc
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):
Address of Service Provider: P.O. Box 367
Mª Curtain, OK/p. 74944 (918) 945-7496
Name of Agent Designated to Receive Notification of Claimed Infringement:  Tevi Butler
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)
RR 4 Box 375
Whitefield, OK 74472
Telephone Number of Designated Agent: 1-918-967-867 9
Facsimile Number of Designated Agent:
Email Address of Designated Agent: tevi_butlev@ 4ahoo, com
Signature of Officer or Representative of the Designating Service Provider:
Date: 8-1-02
Typed/Printed Name and Title: Name: Barbara Nunn
RECEIVED Title: President Hoskell County For
AUG 1 9 2002 12652015

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