

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

Full Legal Name of Service Provider: Laerdal Medical AS

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

Address of Service Provider: Tanke Svilands gate 30, N-4002, Stavanger, Norway

Name of Agent Designated to Receive
Notification of Claimed Infringement: Mr. Stig Frydenlund

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):
c/o Laerdal Medical AS, Tanke Svilands gate 30, N-4002, Stavanger, Norway

Telephone Number of Designated Agent: 47 916 39 272

Facsimile Number of Designated Agent: 47 51 52 3557

Email Address of Designated Agent: stig.frydenlund@laerdal.no

Signature of Officer or Representative of the Designating Service Provider:
Date: October 18, 2007

Typed or Printed Name and Title: Ronald L. Weyhrauch - Director, Legal and Regulatory Affairs, Laerdal Medical AS

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

SCANNED 12-11/2007



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