Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: School Administrative Unit 39

Alternative Name(s) of Service Provider: (including all names under which the service provider is doing business): SAU 39, Clark School, Wilkins Elementary School, Mont Vernon Village School, Amherst Middle School, Souhegan High School, Amherst School District, Mont Vernon School District, Souhegan Cooperative School District.

Address of Service Provider: 1 School Street, PO Box 849, Amherst NH 03031

Name of Agent Designated to Receive Notification of Claimed Infringement: Susan Ward, Director of Technology

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):

SAU 39

1 School Street PO Box 849

Amherst NH 03031

Telephone Number of Designated Agent: 603.673.2690

Facsimile Number of Designated Agent: 603.672.1786

Email Address of Designated Agent: sward@sprise.com

Signature of Officer -- Demonstrative of the Designating Service Provider:

___ Date: 1/9/03

Typed or Printed Name and Title: Michael V. Ananis, Superintendent of Schools

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

RECEIVED

JAN 13 2003

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