

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

Full Legal Name of Service Provider: Aurora University

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

Address of Service Provider: 347 S. Gladstone Ave., Aurora, IL 60506-4892

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Brett Sutton

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):
Brett Sutton, Dean of Information Services, 347 S. Gladstone Ave., Aurora, IL 60506-4892

Telephone Number of Designated Agent: (630) 844-7520

Facsimile Number of Designated Agent: (630) 844-7850

Email Address of Designated Agent: bsutton@aurora.edu

Signature of Officer or Representative of the Designating Service Provider:

Date: 11/6/01

Typed or Printed Name and Title: Andrew Manion, Provost

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

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