

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

Full Legal Name of Service Provider: BLAIR MEMORIAL LIBRARY

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

Address of Service Provider: 416 North Main Street, Clawson, Michigan 48017

Name of Agent Designated to Receive Notification of Claimed Infringement: Elizabeth Andrea Levin

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):
Blair Memorial Library

416 North Main Street
Clawson, MI 48017

Telephone Number of Designated Agent: (248) 588-5500

Facsimile Number of Designated Agent: (248) 588-3114

Email Address of Designated Agent: elevin@tln.lib.mi.us

Signature of Officer or Representative of the Designating Service Provider:

Date: 4/21/99

Typed or Printed Name and Title: Elizabeth Levin
Library Director

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

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