

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

**Full Legal Name of Service Provider:** City of Wilson

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

**Address of Service Provider:** PO Box 10 Wilson NC 27894-0010

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Dathan Shows

**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):  
112 N. Goldsboro Street, Wilson NC 28973

**Telephone Number of Designated Agent:** 252-399-2301

**Facsimile Number of Designated Agent:** 252-296-3016

**Email Address of Designated Agent:** dshows@wilsonnc.org

**Signature of Officer or Representative of the Designating Service Provider:**

[Redacted Signature] Date: 01/22/10

**Typed or Printed Name and Title:** James P. Cauley, III, City Attorney

**FILED** 2 25-2010

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

**\*Note: Current and adjusted fees are available on the Copyright website at  
[www.copyright.gov/docs/fees.html](http://www.copyright.gov/docs/fees.html)**

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