

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

**Full Legal Name of Service Provider:** The Council of Chief State School Officers

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

**Address of Service Provider:** 1 Massachusetts Ave NW, Suite 700, Washington D.C. 20001

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Margaret Millar

**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):  
1 Massachusetts Ave, NW, Suite 700, Washington D.C. 20001

**Telephone Number of Designated Agent:** 202-336-7032

**Facsimile Number of Designated Agent:** 202-789-1792

**Email Address of Designated Agent:** margaretm@ccsso.org

**Signature of Officer or Representative of the Designating Service Provider:** \_\_\_\_\_  
**Date:** August 25, 2009

**Typed or Printed Name and Title:** Margaret Millar, EdSteps Associate

**SCANNED**

**1 0 1 6 - 2 0 0 9**

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

Mail the form to:

Copyright GC/I&R  
P.O. Box 70400  
Washington, DC 20024



**RECEIVED**

OCT 05 2009

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