

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

Full Legal Name of Service Provider: The College of Wooster

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

Address of Service Provider: 1189 Beall Avenue, Wooster, Ohio 44691

Name of Agent Designated to Receive Notification of Claimed Infringement: Sheila T. Wilson

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):
Office of the Secretary, 1101 North Bever Street, Wooster, Ohio 44691

Telephone Number of Designated Agent: 330.263.2313

Facsimile Number of Designated Agent: 330.263.2539

Email Address of Designated Agent: swilson@wooster.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: Anne M. Gates, The College of Wooster, November 2, 2001

Signature of Officer or Representative of the Designating Service Provider: _____
Date: September 30, 2008

Typed or Printed Name and Title: Sheila T. Wilson, Secretary of the College, The College of Wooster

SCANNED 10 24 2008

Note: This Amended 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



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