

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

**Full Legal Name of Service Provider:** The Time Factory, Inc.

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

**Address of Service Provider:** 6355 Morenci Trail, Indianapolis, IN 46268

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Kathryn Hawkins

**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):  
6355 Morenci Trail  
Indianapolis, IN 46268

**Telephone Number of Designated Agent:** 317.290.1333

**Facsimile Number of Designated Agent:** 317.290.1223

**Email Address of Designated Agent:** copyright@pikcal.com

**Signature of Officer or Representative of the Designating Service Provider:** \_\_\_\_\_  
**Date:** 1 November 2012

**Typed or Printed Name and Title:** Kathryn Hawkins  
Licensing Manager

**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)**

Mail the form to:  
**Copyright I&R/Recordation**  
**P.O. Box 71537**  
**Washington, DC 20024**



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