

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

Full Legal Name of Service Provider: Westat, Inc.

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

Address of Service Provider: 1650 Research Boulevard, Rockville, MD 20850

Name of Agent Designated to Receive
Notification of Claimed Infringement: David A. Reesman, Esq.

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):
1650 Research Boulevard, Rockville, MD 20850

Telephone Number of Designated Agent: (301) 251-1500

Facsimile Number of Designated Agent: (301) 610-4820

Email Address of Designated Agent: davidreesman@westat.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: March 3, 2006

Typed or Printed Name and Title: Joseph A. Hunt, President

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.**

SCANNED 3/03/06

150230509



RECEIVED

MAR 14 2006

COPYRIGHT OFFICE