# Interim Designation of Agent to Receive Notification of Claimed Infringement

**Full Legal Name of Service Provider:** Esurance Insurance Services, Inc.

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

Address of Service Provider: 650 Davis Street, San Francisco, CA 94111

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Kerian Bunch, General Counsel

**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):
650 Davis Street, San Francisco, CA 94111

**Telephone Number of Designated Agent:** (415) 875-4500

**Facsimile Number of Designated Agent:** (415) 875-4501

**Email Address of Designated Agent:** corporatecompliance@esurance.com

Signature of Officer or Representative of the Designating Service Provider:
[redacted] Date: 3/23/11

Typed or Printed Name and Title: Kerian Bunch, General Counsel

**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**

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