

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

Full Legal Name of Service Provider: EARLHAM COLLEGE

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

Address of Service Provider: 801 National Road West, Richmond IN 47374

Name of Agent Designated to Receive Notification of Claimed Infringement: TOM KIRK

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):
Drawer 198, Earlham College, Richmond IN 47374

Telephone Number of Designated Agent: 765 983 1360

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: kirkto@earlham.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: Earlham College 12/11/98

Signature of Officer or Representative of the Designating Service Provider: _____ Date: 5/18/07

Typed or Printed Name and Title: LEN CLARK, ACADEMIC DEAN

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



RECEIVED

MAY 30 2007
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