

Interim Designation of Agent to Receive Notification
of Claimed Infringement

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MAY 19 1999

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Full Legal Name of Service Provider: Illinois Wesleyan University

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

Address of Service Provider: 303 E. Emerson Bloomington, IL. 61701

Name of Agent Designated to Receive Notification of Claimed Infringement: Sue Stroyan

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):

Sue Stroyan Sheehan Library Illinois Wesleyan University 303 E. Emerson Bloomington, IL. 61701

Telephone Number of Designated Agent: 309-556-3172

Facsimile Number of Designated Agent: 309-556-3261

Email Address of Designated Agent: sstroyan@titan.iwu.edu

Signature of Representative of the Designating Service Provider: _____

Date: May 17, 1999

Typed or Printed Name and Title: _____

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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