

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

Full Legal Name of Service Provider: Liberty Fund Inc.

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

Address of Service Provider: 8335 Allison Pointe Trail, Ste 300, Indianapolis, IN 46250

Name of Agent Designated to Receive Notification of Claimed Infringement: David H. Hart

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):
David H. Hart, Liberty Fund Inc., 8335 Allison Pointe Trail, Ste 300, Indianapolis, IN 46250

Telephone Number of Designated Agent: 1-800-866-3520

Facsimile Number of Designated Agent: 1-317-577-9067 ATTN David Hart

Email Address of Designated Agent: dhart@libertyfund.org

Signature of Representative of the Designating Service Provider:
[Redacted Signature] Date: 3/28/2011

Typed or Printed Name and Title: Louis T. Perry, attorney for Liberty Fund Inc.

**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**

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



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