

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

Full Legal Name of Service Provider: _____
Mid-East Career and Technology Centers

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Mid-East Career and Technology Centers

Address of Service Provider: 400 Richards Road, Zanesville, OH 43701

Name of Agent Designated to Receive Notification of Claimed Infringement: Debbie Kapp-Salupo

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):
400 Richards Road, Zanesville, OH 43701

Telephone Number of Designated Agent: (740) 454-0105

Facsimile Number of Designated Agent: (740) 454-0731

Email Address of Designated Agent: dkappsalupo@mid-east.k12.oh.us

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 11-24-03

Typed or Printed Name and Title: Debbie Kapp-Salupo, Assistant Superintendent

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

RECEIVED

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