

# Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Murray State University

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

Address of Service Provider: Murray State University, PO Box 9, Murray, KY 42071

Name of Agent Designated to Receive  
Notification of Claimed Infringement: Donald G. Olson

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):

Information Systems, Murray State University, PO Box 9, 12TH & Chestnut  
Streets, IT&T Bldg., Room 112, Murray, Kentucky 42071

Telephone Number of Designated Agent: (502) 762-2192

Facsimile Number of Designated Agent: (502) 762-3465

Email Address of Designated Agent: don.olson@murraystate.edu

Signature of ~~Officer~~ Representative of the Designating Service Provider:

Date: 12/4/98

Typed or Printed Name and Title: Donald G. Olson, CIO

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

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