

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

**Full Legal Name of Service Provider:** North Central Missouri College

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

**Address of Service Provider:** 1301 Main Street Trenton, Mo 64683

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Alan Barnett

**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):  
1301 Main Street Trenton MO 64683

**Telephone Number of Designated Agent:** 660 359 3948 x210

**Facsimile Number of Designated Agent:** 660 359 2211

**Email Address of Designated Agent:** abarnett@mail.ncmc.cc.mo.us

**Sig** \_\_\_\_\_ **icer or Representative of the Designating Service Provider:**

**Date:** 3-13-03

**Typed or Printed Name and Title:** Alan L. Barnett Network Manager

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

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**RECEIVED**

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