

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

Full Legal Name of Service Provider: Novi Community School District

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

Address of Service Provider: 25345 Taft Rd Novi, mi 48374

Name of Agent Designated to Receive
Notification of Claimed Infringement: James Fry

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):

25345 Taft Rd Novi mi 48374

Telephone Number of Designated Agent: 248-449-1261

Facsimile Number of Designated Agent: 248-449-1269

Email Address of Designated Agent: j.fry@fc.novi.k12.mi.us

Signature of Officer or Representative of the Designating Service Provider:

Date: 4-14-99

Typed or Printed Name and Title: James Fry Director of Technology

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

RECEIVED

APR 20 1999

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