Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: _PORTLAND STATE UNIVERSITY ___

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

Address of Service Provider:__P.O. BOX 751, OIT, PORTLAND, OR 97207

Name of Agent Designated to Receive Notification of Claimed Infringement:__SHARON BLANTON_____

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):

PORTLAND STATE UNIVERSITY, OFFICE OF INFORMATION TECHNOLOGIES, SMITH CENTER 18, 1825 SW BROADWAY, PORTLAND, OR 97207.

Telephone Number of Designated Agent:_503-725-9144_____
Facsimile Number of Designated Agent:_503-725-3476_____
Email Address of Designated Agent:__SBLANTON@PDX.EDU_____
Identify the Interim Designation to be Amended, by Service Provider Name and Filing

Date, so that it may be Readily Located in the Directory Maintained by the Copyright

Office:__PORTLAND STATE UNIVERSITY, FILED July 23, 1999.

Signature of Officer or Representative of the Designating Service Provider:

_____ Date: 1/25/08

Typed or Printed Name and Title: __ASSOC. CIO_____

Note: This Amended Interim Designation Must be Accompanied by a $80 Filing Fee Made Payable to the Register of Copyrights.

(Text Box comment Mail the form to:
Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024)

SCANNED 03-28/2008

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