

Interim Designation of Agent to Receive Notification
of Claimed Infringement

Full Legal Name of Service Provider: Peoples Rural Telephone
Corp, Corp Inc.

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

Address of Service Provider: PO Box 159 US HWY 421 S Mukewago
40447

Name of Agent Designated to Receive
Notification of Claimed Infringement: Cozette Neeley

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): PO Box 159, Mukewago, WI 40447

US Highway 421 South *

*Added by CO
per phone call,
C. Neeley, 9/9/03

Telephone Number of Designated Agent: 606 287-7101

Facsimile Number of Designated Agent: 606 287-4032

Email Address of Designated Agent: cneeley@prtconet.org

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 8-20-03

Typed or Printed Name and Title: Cozette Neeley
Information Systems Manager

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

RECEIVED

SEP 09 2003

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