

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

Full Legal Name of Service Provider: SKIDMORE COLLEGE

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

Address of Service Provider: 815 N BROADWAY, SARATOGA SPRINGS, NY 12066

Name of Agent Designated to Receive Notification of Claimed Infringement: WILLIAM DUFFY

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 TECHNOLOGY, SKIDMORE COLLEGE, 815 N BROADWAY,
SARATOGA SPRINGS, NY 12066

Telephone Number of Designated Agent: 518.580.5930

Facsimile Number of Designated Agent: 518.580.5905

Email Address of Designated Agent: dmca-notify@skidmore.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: SKIDMORE COLLEGE, JUNE 25, 2004 #13916490

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 9-1-05

Typed or Printed Name and Title: JUSTIN D. SIPHER
CHIEF TECHNOLOGY OFFICER

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

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RECEIVED

SEP 15 2005

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SCANNED 11/18/05