

JUN 18 1999

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

Full Legal Name of Service Provider: State University of New York College at
Potsdam

**Alternative Name(s) of Service Provider (including all names under which the service
provider is doing business):** SUNY Potsdam, Potsdam College

Address of Service Provider: 44 Pierrepont Avenue, Potsdam, NY 13676

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Scott K. Shewell

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): SUNY Potsdam, 44 Pierrepont Avenue, Potsdam, NY 13676

Telephone Number of Designated Agent: (315) 267-2396

Facsimile Number of Designated Agent: (315) 267-2151

Email Address of Designated Agent: shewelsk@potsdam.edu

SIGNATURE OF OFFICER or Representative of the Designating Service Provider:

Date: 6/4/99

Typed or Printed Name and Title: John A. Fallon, III, President

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

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