

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

Full Legal Name of Service Provider: Swarthmore College

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

Address of Service Provider: 500 College Avenue, Swarthmore, Pa. 19081

Name of Agent Designated to Receive
Notification of Claimed Infringement: Judy Downing

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):
Swarthmore College, Beardsley Hall, 500 College Avenue, Swarthmore, Pa. 19081

Telephone Number of Designated Agent: 610-328-8507

Facsimile Number of Designated Agent: 610-328-7793

Email Address of Designated Agent: downing@swarthmore.edu

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 10/23/00

Typed or Printed Name and Title: Judy Downing
Director of Information Technology Services

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

RECEIVED

OCT 30 2000
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