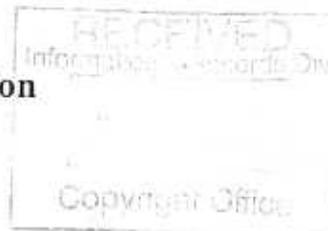


**Interim Designation of Agent to Receive Notification
of Claimed Infringement**



Full Legal Name of Service Provider: Thomas Jefferson University

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Jefferson College of Graduate Studies, Jefferson Medical College, Jefferson School of Health Professionals, Jefferson School of Nursing, Jefferson School of Pharmacy, and Jefferson School of Population Health

Address of Service Provider: 1020 Walnut Street, Philadelphia, PA 19107-5587

Name of Agent Designated to Receive Notification of Claimed Infringement: David Reis

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):
130 South 9th Street, Suite 2210, Philadelphia PA 19107

Telephone Number of Designated Agent: 215-503-8518

Facsimile Number of Designated Agent: 215-923-5294

Email Address of Designated Agent: david.reis@jefferson.edu

Signature of Officer or Representative of the Designating Service Provider:
[Signature] Date: 7/9/2009

Typed or Printed Name and Title: David Reis, Director of IT Security and Policy

SCANNED 00 18 - 2009

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

