# Interim Designation of Agent to Receive Notification of Claimed Infringement

**Full Legal Name of Service Provider:** University of North Carolina at Pembroke

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** UNC at Pembroke, UNCP

Address of Service Provider: Pembroke, NC

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Dr. Maurice Mitchell

**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):
P.O. Box 1510 Pembroke, NC 28372

**Telephone Number of Designated Agent:** 910-521-6883

**Facsimile Number of Designated Agent:** 910-521-6649

**Email Address of Designated Agent:** maurice.mitchell@uncp.edu

...ative of the Designating Service Provider:
Date: 29 May 2003

Typed or Printed Name and Title: Maurice Mitchell, Associate Vice Chancellor for Information Resources

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

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