

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

Full Legal Name of Service Provider: Union College, 807 Union Street
Schenectady, New York 12308

**Alternative Name(s) of Service Provider (including all names under which the service
provider is doing business):** None

Address of Service Provider: _____

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Thomas G. McFadden

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):
Union College, Schaffer Library, 807 Union Street
Schenectady, New York 12308

Telephone Number of Designated Agent: 518-388-6277

Facsimile Number of Designated Agent: 518-388-6641

Email Address of Designated Agent: mcfaddet@union.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing
Date, so that it is _____ maintained by the Copyright
Office: _____

Signature of Officer or Representative of the Designating Service Provider:

Date: 8/31/07

Typed or Printed Name and Title: Christie Sorum, Dean of the Faculty

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

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