

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

Full Legal Name of Service Provider: UNIVERSITY OF WISCONSIN -  
MADISON

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

Address of Service Provider: 1210 W. DAYTON STREET, ROOM 2157  
MADISON, WI 53706

Name of Agent Designated to Receive Notification of Claimed Infringement: KIM MILFORD, INFORMATION SECURITY  
MANAGER

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):

INFORMATION SECURITY MANAGER, 1210 W. DAYTON  
MADISON, WI 53711

Telephone Number of Designated Agent: (608) 263-2477

Facsimile Number of Designated Agent: (608) 265-0667

Email Address of Designated Agent: AFBOSE@WISCONSIN.EDU

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: \_\_\_\_\_

Signature of Officer \_\_\_\_\_ Representative of the Designating Service Provider:  
Date: 11/2/01

**NO OTHER FILING  
REQ'D PER CO FILES**

Typed or Printed Name and Title: ANNIE STUDDEN - CHIEF  
INFORMATION OFFICER & DIRECTOR OF DIVISION OF  
INFORMATION TECHNOLOGY

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



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