

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



Full Legal Name of Service Provider: Wayne State College

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

Address of Service Provider: 1111 Main Street, Wayne, NE 68787

Name of Agent Designated to Receive Notification of Claimed Infringement: Dennis Linster

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):

1111 Main Street
Wayne, NE 68787

Telephone Number of Designated Agent: 402-375-7286

Facsimile Number of Designated Agent: 402-375-7411

Email Address of Designated Agent: delinst1@wsc.edu

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 5-18-10

Typed or Printed Name and Title: Dennis Linster, CIO

Note: This Interim Designation Must be Accompanied by a Filing Fee* Made Payable to the Register of Copyrights.
***Note: Current and adjusted fees are available on the Copyright website at www.copyright.gov/docs/fees.html**

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