

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

Full Legal Name of Service Provider: W.K. Kellogg Foundation

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

Address of Service Provider: One Michigan Avenue East, Battle Creek, MI 49017

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Susan Katz Froning

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):
W.K. Kellogg Foundation, One Michigan Avenue East, Battle Creek, MI 49017

Telephone Number of Designated Agent: 269-969-2144

Facsimile Number of Designated Agent: 269-968-0413

Email Address of Designated Agent: skf@wkkf.org

Signature of Officer or Representative of the Designating Service Provider:

Date: 9/19/10

Typed or Printed Name and Title: Susan Katz Froning, Corporate Secretary and
General Counsel

**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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