

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

Full Legal Name of Service Provider: WASHBURN UNIVERSITY

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

Address of Service Provider: 1700 College, Topeka, KS 66621

Name of Agent Designated to Receive Notification of Claimed Infringement: Susan Jarchow

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 Technology Services

Washburn University

1700 College Topeka, KS 66621

Telephone Number of Designated Agent: 785-231-1010 x 2380

Facsimile Number of Designated Agent: 785-354-8137

Email Address of Designated Agent: dmea1@washburn.edu

Signature of ~~Official~~ Representative of the Designating Service Provider:

Date: 8/30/01

Typed or Printed Name and Title: Wanda B. Hill
Vice President for Administration and Treasurer

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

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