

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

Full Legal Name of Service Provider: Alliance Communications Cooperative Inc.

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

Address of Service Provider: 612 3rd St Garretson SD 57030-0349

Name of Agent Designated to Receive Notification of Claimed Infringement: Craig Selland

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):
612 3rd St Garretson SD 57030-0349

Telephone Number of Designated Agent: 605 594 3411

Facsimile Number of Designated Agent: 605 582 3922

Email Address of Designated Agent: craigs@alliance.coop

Signature of the Designating Service Provider: _____
Date: 8-24-15

Typed or Printed Name and Title: Shirley Flanagan, Customer Service Manager

**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**

Mail the form to:
U.S. Copyright Office, Designated Agents
P.O. Box 71537
Washington, DC 20024-1537

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