

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

Full Legal Name of Service Provider: Alpine Long Distance, LC

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

Address of Service Provider: 923 Humphrey Street, Elkader, IA 52043

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Chris Hopp

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):

Telephone Number of Designated Agent: 563-245-4000

Facsimile Number of Designated Agent: 563-245-2887

Email Address of Designated Agent: chris@alpine-communications.com

Signature of Officer or Representative of the Designating Service Provider:

Date: 8/23/10

Typed or Printed Name and Title: Chris Hopp
General Manager/Chief Operating Officer

**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:
Copyright RRP
P.O. Box 71537
Washington, DC 20024



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