

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

Full Legal Name of Service Provider: American Legacy Foundation

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Legacy, Legacy for Health, truth

Address of Service Provider: 1724 Massachusetts Ave., NW, Washington, D.C. 20036

Name of Agent Designated to Receive Notification of Claimed Infringement: Jewelyn Pickeral

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):
c/o American Legacy Foundation, 1724 Massachusetts Ave., NW, Washington, D.C. 20036

Telephone Number of Designated Agent: 202-454-5595

Facsimile Number of Designated Agent: 202-454-5773

Email Address of Designated Agent: jpickeral@legacyforhealth.org

 **the Designating Service Provider:** _____
Date: August 6, 2014

Typed or Printed Name and Title: Ellen Vargyas, General Counsel and Corporate Secretary

**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 I&R/Recordation
P.O. Box 71537
Washington, DC 20024**

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AUG 20 2014

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