

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

Full Legal Name of Service Provider: Appraisal Institute

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

Address of Service Provider: 550 W. Van Buren, Suite 1000

Name of Agent Designated to Receive Notification of Claimed Infringement: Jeffrey Liskar, Esq.

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):
Appraisal Institute, 550 W. Van Buren Street, Suite 1000, Chicago, Illinois 60607

Telephone Number of Designated Agent: 312.335.4406

Facsimile Number of Designated Agent: 312.335.4416

Email Address of Designated Agent: jliskar@appraisalinstitute.org

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 8/9/07

Typed or Printed Name and Title: Fred Grubbe, CEO

SEARCHED

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Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.

Mail the form to:

Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024



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