

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

Full Legal Name of Service Provider: EPCOR

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

Address of Service Provider: 3100 Broadway, Suite 609, Kansas City, MO 64111-2413

Name of Agent Designated to Receive Notification of Claimed Infringement: Ann-Marie Bartels

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):
EPCOR, 3100 Broadway, Suite 609, Kansas City, MO 64111-2413

Telephone Number of Designated Agent: 816.474.5630

Facsimile Number of Designated Agent: 816.471.7665

Email Address of Designated Agent: ann-marieb@epcor.org

Designating Service Provider: _____
Date: 6/19/2013

Typed or Printed Name and Title: Ann-Marie Bartels, Chief Executive 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**

**Scanned
JUL 01 2013**

Mail the form to:
**Copyright I&R/Recordation
P.O. Box 71537
Washington, DC 20024**



**Received
JUN 25 2013
Copyright Office**