

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

**Full Legal Name of Service Provider:** Fairfax Court Appointed Special Advocates, Inc.

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**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** Fairfax CASA  
www.fairfaxcasa.org, www.casafairfax.org

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**Address of Service Provider:** 4103 Chain Bridge Road, Suite 200, Fairfax, VA 22030

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**Name of Agent Designated to Receive Notification of Claimed Infringement:** Lisa Banks

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**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):  
4103 Chain Bridge Road, Suite 200, Fairfax, VA 22030

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**Telephone Number of Designated Agent:** (703) 273-3526

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**Facsimile Number of Designated Agent:** (703) 273-2201

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**Email Address of Designated Agent:** executivedirector@casafairfax.org

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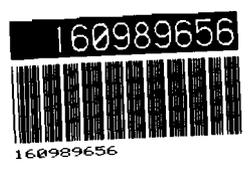
**Signature of Officer or Representative of the Designating Service Provider:** \_\_\_\_\_  
Date: 8/3/11

**Typed or Printed Name and Title:** Lisa Banks, Executive Director

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**Note: This Interim Designation Must be Accompanied by a Filing Fee\*  
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