

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

Full Legal Name of Service Provider: Tennessee Technology Center at Knoxville

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

Address of Service Provider: 1100 Liberty Street, Knoxville, TN 37919

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Sam Soto

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):
Tennessee Technology Center at Knoxville, 1100 Liberty St., Knoxville, TN 37919

Telephone Number of Designated Agent: 865-546-5567 ext 106

Facsimile Number of Designated Agent: 865-971-4474

Email Address of Designated Agent: sam.soto@ttcknoxville.edu

Signature of the Designating Service Provider:

Date: 10/11/12

Typed or Printed Name and Title: Mr. Dwight Murphy, Interim Director

**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

DEC 14 2012

Received

NOV 20 2012

Copyright Office

