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| D | O NOT WRITE ABOVE THIS LINE. IF YOU NEED MO | RE SPACE, USE A SEP | ARATE CONT | | | - California - Cal |
| 1 | Please give the make and model of the vessel the Scout 245 XSF | at embodies the desig | gn. | | | |
| TITLE | | | | _ | 4 | |
| 9 (a) | What is the type or style of the design for which Center console fishing boat. | n registration is sough | it? | | | |
| | Provide a brief general statement setting forth th Hull form, deck configuration inclusion inlay, and overall appearance. | | | ip-down t | able lid v | with Corian |
| this is a single design. Check here if = | iniay, and overall appearance. | | | | | |
| LINECK DEFE II | | | 1 A. 10 | | ated or rearra | inged. |
| registering more than one design. Use Form D-VH/CON for additional designs. | If this design is derived from an earlier design, o | lescribe how that desig | gn has been n | evised, adaţ | ited, or rearre | |
| registering more than one design. Use Form D-VH/CON for additional designs. | If this design is derived from an earlier design, of Provide the name and address of the designer(s), design was made within the regular scope of employ or impossible to ascribe. | The name of the emplyment of the designer(s | loyer may be) and (2) the inc | given instea dividual auth | nd of the designorship of the e | gner(s) if, (1) the |
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| x | | | CORRESPONDENCE | FOR COPYRIGHT OFFICE USE ONLY | |
| DO NOT V | | | E A SEPARATE CONTINUATION SHEET. (Form | | |
| 7. | Name: William Fergu | | whom correspondence regarding this applica | ation may be directed: | |
| CONTACT PERSON | Address: 2531 Hyw 78 | West | | | |
| | | e, SC 29483 Email address wferguson@scoutboats.com | | | |
| | FAX number 843 821 | 1540 | Daytime phone: (843) | 821 0068 | |
| 8 | Give the name and account Name of Account: | number if the registration fe | ee is to be charged to a Deposit Account establis | shed in the Copyright Office: | |
| DEPOSIT | Account number: | | | | |
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| Certificate will be mailed in window envelope to this address: | Name V | Complete all necessary spaces Sign your application in space 9 |
| | Steve Potts | SEND ALL 3 ELEMENTS IN THE SAME PACKAGE: |
| | Number/Street/Apt V 2531 Hwy 78 West | Application form Nonrefundable filing fee in check or money order payable to <i>Register of Capyrights</i> Design material |
| | City/State/ZiP▼ Summerville, SC 29483 | MAIDTO: Dept. D-VH Vessel Hull Registration P.O. Box 71380 Washington, D.C. 20024-1380 |

17 U.S.C. §1327. Penalty for false representation. "Whoever knowingly makes a false representation materially affecting the rights obtainable under this chapter for the purpose of obtaining registration of a design under this chapter shall pay a penalty of not less than \$500 and not more than \$1,000, and any rights or privileges that individual may have in the design under this chapter shall be forfeited."

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