Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Agency for Instructional Technology

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

Address of Service Provider: Box A, 1800 N. Stonelake Drive, Bloomington, IN 47402

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael F. Sullivan

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): 1800 Stonelake Drive
Bloomington, IN 47404

Telephone Number of Designated Agent: 812-339-2203

Facsimile Number of Designated Agent: 812-333-4278

Email Address of Designated Agent: sullivan@ait.net

Signature of Officer or Representative of the Designating Service Provider:

Date: October 30, 2000

Typed or Printed Name and Title: Michael F. Sullivan, Executive Director

Note: This Interim Designation Must be Accompanied by a $20 Filing Fee Made Payable to the Register of Copyrights.

RECEIVED

NOV 29 2000
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