

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Baldwin Telecom, Inc.

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

Address of Service Provider: 930 Maple Street, Baldwin WI 54002

Name of Agent Designated to Receive
Notification of Claimed Infringement: Duane Russett

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):

930 Maple Street; PO Box 420
Baldwin WI 54002-0420

Telephone Number of Designated Agent: 715-684-3346

Facsimile Number of Designated Agent: 715-684-4747

Email Address of Designated Agent: duane.russett@baldwin-telecom.net

Signature of Officer or Representative of the Designating Service Provider:

Date: 3-2-99

Typed or Printed Name and Title: Larry Kneegenorf, General Manager

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

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