

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

**Full Legal Name of Service Provider:** Bay Area Air Quality Management District  
Employees' Association, Inc

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

**Address of Service Provider:** P.O. Box 420434, San Francisco, CA 941242-0434

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Alison Kirk

**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):  
BAAQMD, 939 Ellis Street, San Francisco, CA 94109

**Telephone Number of Designated Agent:** 415-749-5169

**Facsimile Number of Designated Agent:** 415-749-4741

**Email Address of Designated Agent:** akirk@baaqmd.gov

**Signature of Officer or Representative of the Designating Service Provider:**  
\_\_\_\_\_  
Date: 12/7/2010

**Typed or Printed Name and Title:** Steven S. Chin  
BAAQMD Employees Association President

**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](http://www.copyright.gov/docs/fees.html)**

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