

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

Full Legal Name of Service Provider: California Academy of Sciences

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

Address of Service Provider: 55 Concourse Drive, Golden Gate Park, SF, CA 94118

Name of Agent Designated to Receive
Notification of Claimed Infringement: Barbara Andrews

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):

55 Concourse Drive, Golden Gate Park,
San Francisco, CA 94118

Telephone Number of Designated Agent: 415 379-5206

Facsimile Number of Designated Agent: 415 379-5746

Email Address of Designated Agent: bandrews@calacademy.org

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 7/24/08

Typed or Printed Name and Title: Karen S. Frank
Attorney

**Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.**

SCANNED 8.28.08

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