

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

**Full Legal Name of Service Provider:** Capital One Financial Corporation

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**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** Capital One; Capital One Services, LLC;  
Capital One, National Association

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**Address of Service Provider:** 15000 Capital One Drive, Richmond, VA 23238

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**Name of Agent Designated to Receive Notification of Claimed Infringement:** Legal Counsel - Copyright/Trademarks

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**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):  
12077-0270/Trademarks, 15000 Capital One Drive, Richmond, VA 23238

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**Telephone Number of Designated Agent:** 267-264-9354

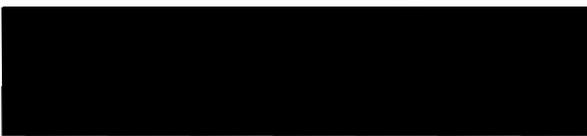
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**Facsimile Number of Designated Agent:** 804-284-6924

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**Email Address of Designated Agent:** dmca@capitalone.com

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 e of the Designating Service Provider:  
Date: 10/9/2015

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**Typed or Printed Name and Title:** Michael Crane, Asst. General Counsel

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**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)**

Mail the form to:  
**U.S. Copyright Office, Designated Agents  
P.O. Box 71537  
Washington, DC 20024-1537**

**Scanned**  
**DEC 14 2015**  
  
**Received**  
**OCT 14 2015**  
**Copyright Office**