Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider:	Cranium, Inc.
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):	
Address of Service Provider: 1511 3rd Ave	mue. Suite 433. Seattle. WA 98101
Name of Agent Designated to Receive Notification of Claimed Infringement:	Parrish L. Jones
Full Address of Designated Agent to Whic Box or similar designation is not acceptable except we the geographic location): 1511 3 rd Avenue, Suite 433, Seattle, WA	where it is the only address that can be used in
Telephone Number of Designated Agent: _	(206) 652-9708 Ext 111
Facsimile Number of Designated Agent:	(206) 652-1483
Email Address of Designated Agent:	parrish@playcranium.com
Signature of Officer or Representative of the	he Designating Service Provider:
	Date: 12 05 01
Typed or Printed Ne Perris	h L. Jones, CFO COO
Note: This Interim Design Payable to the Register of Copyrights.	companied by a \$20 Filing Fee Made

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