

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

Full Legal Name of Service Provider: Delaware State University

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

Address of Service Provider: 1200 N Dupont Highway, Dover, DE 19901

Name of Agent Designated to Receive Notification of Claimed Infringement: Dr. Russell Merrill, CIO

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):
Info Technology, Delaware State University, 1200 N Dupont Highway, Dover, DE 19901

Telephone Number of Designated Agent: 302-857-7037

Facsimile Number of Designated Agent: 302-857-7025

Email Address of Designated Agent: rmerrill@desu.edu

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 2 March 2006

Typed or Printed Name and Title: Russell B. Merrill, Vice President for Technology and Chief Information Officer

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

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