

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

Full Legal Name of Service Provider: _dscout, Inc.

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

Address of Service Provider: _432 N Clark Street, Suite 400, Chicago IL 60654

Name of Agent Designated to Receive Notification of Claimed Infringement: _Chip Hardt

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): 432 N Clark Street, Suite 400, Chicago IL 60654

Telephone Number of Designated Agent: __312 515 3548

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: _____chip@dscout.com_____

 Designating Service Provider: _____
Date: 9/15/15

Typed or Printed Name and Title: _____ Chip Hardt, COO

**Note: This Interim Designation Must be Accompanied by a Filing Fee* \$140⁻
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**

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

SCANNED
MAR 28 2017

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Copyright Office