

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

Full Legal Name of Service Provider: East Maine School District 63

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

Address of Service Provider: 10150 Dee Road, Des Plaines, IL 60016

Name of Agent Designated to Receive Notification of Claimed Infringement: Keith Shaffer, Director of Technology

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):
East Maine School District 63, 10150 Dee Road, Des Plaines, IL 60016

Telephone Number of Designated Agent: 847.299.1900

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: kshaffer@emsd63.org



Signature of the Designating Service Provider: _____
Date: October 7, 2015

Title: Dr. Scott Clay, Superintendent

**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**

**Scanned
OCT 08 2015**

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

**Received
SEP 30 2015
Copyright Office**