

Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Emporia State University

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

Address of Service Provider: 1200 Commercial St, Emporia, KS 66801

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael D. Erickson

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):
Emporia State University, ATTN: Michael D. Erickson, 1200 Commercial St, Emporia, KS 66801

Telephone Number of Designated Agent: 620-341-5297

Facsimile Number of Designated Agent: 620-341-5894

Email Address of Designated Agent: mericks2@emporia.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: Emporia State University. 09/26/2008

Signature of Official Representative of the Designating Service Provider: _____
Date: 11/13/2013

Typed or Printed Name and Title: _____
Michael D. Erickson, Chief Information Officer

Note: This Amended 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

Mail the form to:
Copyright I&R/Recordation
P.O. Box 71537
Washington, DC 20024



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