

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

Full Legal Name of Service Provider: Expedia Corporate Travel LLC

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

Address of Service Provider: 3150 139th Avenue S.E., Bellevue, WA 98005

Name of Agent Designated to Receive
Notification of Claimed Infringement: IP/Trademark Counsel

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):
3150 139th Avenue S.E., Bellevue, WA 98005

Telephone Number of Designated Agent: (425) 679-3752

Facsimile Number of Designated Agent: (425) 679-7251

Email Address of Designated Agent: exp-copyright@expedia.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: April 21, 2008

Typed or Printed Name and Title: Sean Croman, Attorney

SCANNED 06-27-2008

**Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.**



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