

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

Full Legal Name of Service Provider: Follett Higher Education Group, Inc.

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

Address of Service Provider: 1818 Swift Drive, Oak Brook, Illinois 60523

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Carol Mjoseth

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):
1818 Swift Drive, Oak Brook, Illinois 60523

Telephone Number of Designated Agent: (630) 371-5238

Facsimile Number of Designated Agent: (630) 279-9235

Email Address of Designated Agent: cmjoseth@fhcg.follett.com

Signature of Officer or Representative of the Designating Service Provider:

[Redacted Signature] Date: 8/13/2010

Typed or Printed Name and Title: Carol Mjoseth, Director of Marketing

**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**

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