

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

Full Legal Name of Service Provider: Humana Inc.

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

Address of Service Provider: 500 West Main Street, Louisville, KY 40202

Name of Agent Designated to Receive Notification of Claimed Infringement: Todd Veirs

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):
500 West Main Street
LOUISVILLE, KY 40202

Telephone Number of Designated Agent: 502-580-3608

Facsimile Number of Designated Agent: 502-508-3608

Email Address of Designated Agent: tveirs@humana.com

 the Designating Service Provider:
Date: June 8, 2015

Typed or Printed Name and Title: Ralph Wilson, Vice President and Associate General Counsel

**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**

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

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JUN 16 2015
Copyright Office