

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

**Full Legal Name of Service Provider:** Illinois Rural Electric Cooperative

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

**Address of Service Provider:** 2 South Main Street, Winchester, IL 62694

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Bruce C. Beal

**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):  
3106 N. Main Street  
Canton, IL 61520

**Telephone Number of Designated Agent:** 309-647-6301

**Facsimile Number of Designated Agent:** 309-647-1710

**Email Address of Designated Agent:** lawfirm@brucebeallaw.com

 **Designating Service Provider:**  
**Date:** February 2, 2015

**Typed or Printed Name and Title:** Bruce Giffin, General Manager

**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](http://www.copyright.gov/docs/fees.html)**

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