

Interim Designation of Agent to Receive Notification  
of Claimed Infringement

Full Legal Name of Service Provider: Independence School District

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

Address of Service Provider: 218 N. Pleasant Independence, MO 64050

Name of Agent Designated to Receive Notification of Claimed Infringement: Dr. Russ Brock

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):

218 N. Pleasant  
Independence, MO 64050

Telephone Number of Designated Agent: 816-521-2700

Facsimile Number of Designated Agent: 816-521-2999

Email Address of Designated Agent: rbrock@indep.k12.mo.us

Signature of Officer or Representative of the Designating Service Provider: \_\_\_\_\_  
Date: 7-30-04

Typed or Printed Name and Title: Dr. Russ Brock  
Assistant Superintendent for Technology

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee  
Made Payable to the Register of Copyrights.

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