

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

Full Legal Name of Service Provider: Jefferson County Library Cooperative

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

Address of Service Provider: 2100 Park Place, Birmingham, AL 35203

Name of Agent Designated to Receive Notification of Claimed Infringement: Elizabeth Swift

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):
2100 Park Place, Birmingham, AL 35203

Telephone Number of Designated Agent: 205-226-3720

Facsimile Number of Designated Agent: 205-226-3729

Email Address of Designated Agent: eswift@bham.lib.al.us

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 5/9/08

Typed or Printed Name and Title: Patricia Ryan, Director

SCANNED 07-29-2008

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

Mail the form to:

Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024

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MAY 27 2008

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