

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

Full Legal Name of Service Provider: Joel Barlow High School

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Regional School District # 9

Address of Service Provider: 100 Black Rock Turnpike, Redding, CT 06896

Name of Agent Designated to Receive
Notification of Claimed Infringement: John Crowley

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):
100 Black Rock Turnpike, Redding, CT 06896

Telephone Number of Designated Agent: 203-938-2508-x1540

Facsimile Number of Designated Agent: 203-938-9851

Email Address of Designated Agent: jcrowley@region9ps.org

Signature of Officer or Representative of the Designating Service Provider:

Date: 4/28/2008

Typed or Printed Name and Title: John Crowley, Director of Learning Resources
and Information Technology

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



RECEIVED

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