

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

**Full Legal Name of Service Provider:** Kansas Press Association

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

**Address of Service Provider:** 5423 SW 7th, Topeka, KS. 66606

**Name of Agent Designated to Receive Notification of Claimed Infringement:** David Furnas

**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):  
Kansas Press Association  
5423 SW 7th, Topeka, KS. 66606

**Telephone Number of Designated Agent:** 785 271 5304

**Facsimile Number of Designated Agent:** 785 271 7341

**Email Address of Designated Agent:** dfurnas@ksnews.com

**Signature of \_\_\_\_\_ Representative of the Designating Service Provider:**  
[Signature] Date: Nov. 16, 1998

**Typed or Printed Name and Title:** David L. FURNAS  
EXECUTIVE DIRECTOR

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.**

**RECEIVED**

**NOV 24 1998**

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