

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

**Full Legal Name of Service Provider:** Lehigh University

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

**Address of Service Provider:** 27 Memorial Drive West, Bethlehem, PA 18015

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Keith K. Hartranft

**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):

Lehigh University, EWFM Fairchild Martindale Library and Computing Center,  
8B East Packer Avenue, Bethlehem, PA 18015

**Telephone Number of Designated Agent:** 610-758-3994

**Facsimile Number of Designated Agent:** 610-758-4983

**Email Address of Designated Agent:** copyright@lehigh.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: Lehigh University, dated 1/12/99



**Signature of the Designating Service Provider:** \_\_\_\_\_  
**Date:** August 20, 2013

**Typed or Printed Name and Title:** Keith K. Hartranft, Information Security and Policy Officer

Note: This Amended 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)

Mail the form to:  
**Copyright I&R/Recordation  
P.O. Box 71537  
Washington, DC 20024**



**Received**  
**AUG 29 2013**  
**Copyright Office**