

Interim Designation of Agent to Receive Notification  
of Claimed Infringement

Full Legal Name of Service Provider: Lynden School District  
# 504

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

Address of Service Provider: 1203 Bradley Road Lynden WA. 98264

Name of Agent Designated to Receive  
Notification of Claimed Infringement: Elizabeth A. Hamming

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):

1203 Bradley Road, Lynden WA. 98264

Telephone Number of Designated Agent: (360) 354-4401 x 208

Facsimile Number of Designated Agent: (360) 354-0991

Email Address of Designated Agent: hamminge@lynden.wednet.edu

Signature of Officer or Representative of the Designating Service Provider:

Date: 09/11/03

Typed or Printed Name and Title: Elizabeth A. Hamming  
Librarian

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

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RECEIVED

OCT 07 2003

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