

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

Full Legal Name of Service Provider: Library of Michigan, State of Michigan

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

Address of Service Provider: 717 W. Allegan, Lansing, MI 48909

Name of Agent Designated to Receive Notification of Claimed Infringement: Ellen Richardson

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):
Ellen Richardson, Executive Division, Library of Michigan, 717 W. Allegan, Lansing, MI 48909

Telephone Number of Designated Agent: (517) 373-1299

Facsimile Number of Designated Agent: (517) 373-5700

Email Address of Designated Agent: allenr@libofmich.lib.mi.us

Signature of Officer or Representative of the Designating Service Provider:

[Signature] **Date:** 5/17/99

Typed or Printed Name and Title: Dianne Odrobina, Legislative Council Administrator

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

RECEIVED

JUN 15 1999

COPYRIGHT OFFICE

106229147



106229147