

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

Full Legal Name of Service Provider: NORTH HENNEPIN COMMUNITY COLLEGE

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

Address of Service Provider: 7411 85TH AVENUE N
BROOKLYN PARK MN 55445

Name of Agent Designated to Receive Notification of Claimed Infringement: TIM PETERS

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):

TIM PETERS, LIBRARY, NORTH HENNEPIN COMMUNITY COLLEGE,
7411 85TH AVENUE N, BROOKLYN PARK MN 55445

Telephone Number of Designated Agent: (763) 424-0739

Facsimile Number of Designated Agent: (763) 493-0569

Email Address of Designated Agent: tim.peters@nhcc.mnscu.edu

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 6/18/04

Typed or Printed Name and Title: TIM PETERS, LIBRARIAN

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

RECEIVED

JUL 30 2004

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