

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

**Full Legal Name of Service Provider:** Northern Illinois University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** none

**Address of Service Provider:** NIU Information Security Dekalb, IL 60115

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Jim Meyers

**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):

Jim Meyers, Manager Information Security Northern Illinois University Dekalb, IL 60115

**Telephone Number of Designated Agent:** 815-753-8538

**Facsimile Number of Designated Agent:** 815-753-2555

**Email Address of Designated Agent:** jdmeyers@niu.edu or abuse@niu.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: NIU J. R. Fatz filed July 2000

**Signature of Representative of the Designating Service Provider:** \_\_\_\_\_  
**Date:** 7/10/2013  
**Typed or Printed Name and Title:** James D. Meyers, Manager Information Security

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**  
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**Washington, DC 20024**



Scanned  
JUL 23 2013

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JUL 15 2013  
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