

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

**Full Legal Name of Service Provider:** Pierce College District

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

**Address of Service Provider:**  
Pierce College District  
9401 Farwest Dr SW  
Lakewood, WA 98498

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Michael Hoelscher

**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):

Pierce College District  
9401 Farwest Dr SW  
Lakewood, WA 98498

**Telephone Number of Designated Agent:** 253-964-6535

**Facsimile Number of Designated Agent:** 253-964-7339

**Email Address of Designated Agent:** mhoelsch@pierce.ctc.edu

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

\_\_\_\_\_ Date: 03/28/12

Scanned  
APR 29 2013

**Typed or Printed Name and Title:**  
Mike Stocke, Chief Information Officer

Received  
APR 18 2013

Copyright Office

**Note: This 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)**

