

Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Plymouth State University

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

Address of Service Provider: 17 High St, Plymouth NH 03264

Name of Agent Designated to Receive Notification of Claimed Infringement: Dwight Fischer

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):
17 High St MSC 28, Plymouth NH 03264

Telephone Number of Designated Agent: 603-535-2342

Facsimile Number of Designated Agent: 603-535-2263

Email Address of Designated Agent: ITS-Security@plymouth.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: 119538734

Signature of Officer or Representative of the Designating Service Provider: _____ Date: 9-25-07

Typed or Printed Name and Title: Dwight Fischer CIO

~~Serial~~ 10 19-2007

Note: This Amended Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.

Mail the form to:
Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024

