

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

**Full Legal Name of Service Provider:** Prosper Independent School District

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

**Address of Service Provider:** 605 E. 7th Street, Prosper, TX 75078

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Holly Ferguson

**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):  
605 E. 7th Street, Prosper, TX 75078

**Telephone Number of Designated Agent:** 469-219-2020

**Facsimile Number of Designated Agent:** 972-346-9247

**Email Address of Designated Agent:** HJFerguson@prosper-isd.net

**Signature of Officer or Representative of the Designating Service Provider:**  
 Date: 9/27/11

**Typed or Printed Name and Title:** Dr. Michael Goddard  
Assistant Superintendent of Business & Operations

**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)**

SCANNED  
APR 28 2017

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