

**INTERIM DESIGNATION OF AGENT TO RECEIVE NOTIFICATION  
OF CLAIMED INFRINGEMENT**

**Note:** This Interim Designation must be accompanied by a \$30 filing fee made payable to the *Register of Copyrights*. Please mail this form to: Copyright GC/I&R, P.O. Box 70400, Southwest Station, Washington, D.C. 20024

**Full Legal Name of Service Provider:** Saginaw Community Foundation

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** Saginaw County's Promise

**Address of Service Provider:** 100 South Jefferson, Suite 201  
Saginaw, MI 48607

**RECEIVED**

NOV 14 2003

**COPYRIGHT OFFICE**

**Name of Agent Designated to Receive Notification of Claimed Infringement:**  
Tom Bellsky

**Full Address of Designated Agent to which Notification Should be Sent:**  
(Please ensure you are using a street address and not a PO Box when including the address of your Copyright Agent)

100 South Jefferson, Suite 201  
Saginaw, MI 48607

**Telephone Number of Designated Agent:** 989-755-0545

**Facsimile Number of Designated Agent:** 989-755-6524

**Email Address of Designated Agent:** tom@saginawfoundation.org

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

**Date:** 11-7-03

**Typed/Printed Name and Title:** Name: Lucy Allen

Title: President and CEO, Saginaw Community Foundation

**136583644**

