

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

Full Legal Name of Service Provider: Salem Academy and
College

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

Address of Service Provider: 600 S. Church St.
Winston-Salem, NC 27108

Name of Agent Designated to Receive Notification of Claimed Infringement: Robert Mistor

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):
Salem Academy and College
600 S. Church St. Winston-Salem, NC 27108

Telephone Number of Designated Agent: 336 721-2600

Facsimile Number of Designated Agent: 336 721-2653

Email Address of Designated Agent: dmca-agent@saalem.edu

Signature of _____ Representative of the Designating Service Provider:
Date: Nov. 12, 2001

Typed or Printed Name and Title: OLIVIA PAIGE FRANCH
DIRECTOR OF ADMINISTRATION / PLANNING

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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