

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

Full Legal Name of Service Provider: SISCOM, INC.

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

Address of Service Provider: 130 W. SECOND ST, STE 1100 DAYTON, OH
45402

Name of Agent Designated to Receive Notification of Claimed Infringement: Robert S. Adams

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):

Robert S. Adams, SISCOM, Inc.
130 W. SECOND ST, STE 1100, DAYTON, OH 45402

Telephone Number of Designated Agent: 937-222-8150 x111

Facsimile Number of Designated Agent: 937-222-8153

Email Address of Designated Agent: dmca@siscom.net

Name of the Designating Service Provider: _____
Date: 5-23-02

Typed or Printed Name and Title: Robert S. Adams, President

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

RECEIVED

JUN 10 2002

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