

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

**Full Legal Name of Service Provider:** Southern New Hampshire University

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

**Address of Service Provider:** 2500 North River Road, Manchester New Hampshire 03106

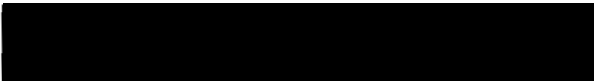
**Name of Agent Designated to Receive Notification of Claimed Infringement:** Evan M. Lowry

**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):  
Attention: Evan M. Lowry, Staff Attorney, Office of General Counsel and Compliance,  
Southern New Hampshire University, 2500 North River Rd. Manchester NH 03106-1045

**Telephone Number of Designated Agent:** 603-645-9733

**Facsimile Number of Designated Agent:** 603-669-7672

**Email Address of Designated Agent:** e.lowry@snhu.edu

 of the Designating Service Provider:  
Date: 07/05/2016

**Typed or Printed Name and Title:** Evan M. Lowry, Staff Attorney

**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)**

Mail the form to:  
U.S. Copyright Office, Designated Agents  
P.O. Box 71537  
Washington, DC 20024-1537

SCANNED  
AUG 24 2016

Received  
AUG 04 2016  
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