

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

**Full Legal Name of Service Provider:** St. Bonaventure University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** SBU, sbu.edu, bonaventure.edu, St. Bonaventure, Bonaventure Bonaventure University

**Address of Service Provider:** 3261 West State Road St. Bonaventure, NY 14778

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Brian Kellogg

**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):  
3261 West State Road St. Bonaventure, NY 14778

**Telephone Number of Designated Agent:** 716-375-2000

**Facsimile Number of Designated Agent:** 716-375-2040

**Email Address of Designated Agent:** copyright@sbu.edu

**Representative of the Designating Service Provider:**  
[Redacted] Date: 12/9/2010

**Typed or Printed Name and Title:** Brian Kellogg Network Services Manager

**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  
JAN 26 2011

Mail the form to:  
Copyright RRP  
P.O. Box 71537  
Washington, DC 20024



Received  
JAN 14 2011  
Copyright Office