

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

**Full Legal Name of Service Provider:** TC Wireless, Inc.

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

**Address of Service Provider:** 1568 South 1000 Road, P.O. Box 239, Council Grove, Kansas

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Dale L. Jones

**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):  
TC Wireless, Inc., 1568 South 1000 Road, P.O. Box 239, Council Grove, Kansas, 66846

**Telephone Number of Designated Agent:** (620) 767-5153

**Facsimile Number of Designated Agent:** (620) 767-8495

**Email Address of Designated Agent:** djones@tctainc.net

\_\_\_\_\_ of the Designating Service Provider:  
Date: 5-25-2012

**Typed or Printed Name and Title:** Dale L. Jones, CEO

**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)**

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