

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

Full Legal Name of Service Provider: University of Massachusetts - Dartmouth

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

Address of Service Provider: UMass Dartmouth, 285 Old Westport Rd.,
North Dartmouth, MA 02747

Name of Agent Designated to Receive
Notification of Claimed Infringement: Joyce Rosinha

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):

CITS, Dartmouth Library, UMass Dartmouth, 3rd Floor, Rm 320,
285 Old Westport Road, North Dartmouth, MA 02747-2300

Telephone Number of Designated Agent: 508-999-8528

Facsimile Number of Designated Agent: 508-999-8162

Email Address of Designated Agent: jrosinha@umassd.edu

Signature of Officer or Representative of the Designating Service Provider: _____

Date: June 12, 2006

Typed or Printed Name and Title: Joyce Rosinha, CITS System Access and
Security Manager

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.

SCANNED 08 01-2006

RECEIVED

JUL 14 2006

COPYRIGHT OFFICE

154017208



154017208