



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

**Full Legal Name of Service Provider:** Wittenberg University

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

**Address of Service Provider:** 200 West Ward St. Springfield, Ohio 45501-0720

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Scott Powell

**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):  
Information Technology Services, Wittenberg University, 200 West Ward St. Springfield, Ohio 45501-0720

**Telephone Number of Designated Agent:** 937-525-3821

**Facsimile Number of Designated Agent:** 937-327-7372

**Email Address of Designated Agent:** spowell@wittenberg.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: \_\_\_\_\_

**Signature of Officer or Representative of the Designating Service Provider:**  
\_\_\_\_\_  
**Date:** September 22, 2011

**Typed or Printed Name and Title:** William S. Powell  
Director, IT Infrastructure and Support

Note: This Amended 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:  
**Copyright I&R/Recordation**  
**P.O. Box 71537**  
**Washington, DC 20024**



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DEC 10 2011