

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

**Full Legal Name of Service Provider:** Policy Initiatives Group

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

**Address of Service Provider:** 10266 S.W. Lancaster Road, Portland, OR 97219


**Name of Agent Designated to Receive Notification of Claimed Infringement:** Linda K. Williams

**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):  
10266 S.W. Lancaster Road  
Portland, OR 97219

**Telephone Number of Designated Agent:** 503-293-0399

**Facsimile Number of Designated Agent:** 866-795-9415

**Email Address of Designated Agent:** linda@lindawilliams.net

**Signature of Officer or Representative of the Designating Service Provider:**  **Date:** 12/29/11

**Typed or Printed Name and Title:** Linda K. Williams, Secretary

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