

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

Full Legal Name of Service Provider: Spencer Savings Bank, SLA

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

Address of Service Provider: 611 River Drive, Elmwood Park, NJ 07407

Name of Agent Designated to Receive Notification of Claimed Infringement: Janel Bazih

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):
611 River Drive, Elmwood Park, NJ 07407

Telephone Number of Designated Agent: 201-703-3800

Facsimile Number of Designated Agent: 201-797-5473

Email Address of Designated Agent: marketing@spencersavings.com

_____ representative of the Designating Service Provider:
_____ Date: 10/04/12

Typed or Printed Name and Title: Janel Bazih, AVP & Marketing 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**

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