

Copyright Office fees are subject to change. For current fees, check the Copyright Office website at [www.copyright.gov](http://www.copyright.gov), write the Copyright Office, or call (202) 707-3000.

REGISTRATION NUMBER \_\_\_\_\_

TX	TXU	PA	PAU	VA	VAU	SR	SRU	RE
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EFFECTIVE DATE OF SUPPLEMENTARY REGISTRATION

Month Day Year

**DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.**

**A**

Title of Work ▼

Registration Number of the Basic Registration ▼

Year of Basic Registration ▼

Name(s) of Author(s) ▼

Name(s) of Copyright Claimant(s) ▼

**B**

Location and Nature of Incorrect Information in Basic Registration ▼

Line Number \_\_\_\_\_ Line Heading or Description \_\_\_\_\_

Incorrect Information as It Appears in Basic Registration ▼

Corrected Information ▼

Explanation of Correction ▼

**C**

Location and Nature of Information in Basic Registration to be Amplified ▼

Line Number \_\_\_\_\_ Line Heading or Description \_\_\_\_\_

Amplified Information and Explanation of Information ▼

FUNDS RECEIVED DATE

EXAMINED BY

CORRESPONDENCE

REFERENCE TO THIS REGISTRATION ADDED TO BASIC REGISTRATION  YES  NO

FOR COPYRIGHT OFFICE USE ONLY

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

Continuation of:  Part B or  Part C

D

Correspondence: Give name and address to which correspondence about this application should be sent.

E

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Deposit Account: If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.

Name \_\_\_\_\_

Account Number \_\_\_\_\_

Certification\* I, the undersigned, hereby certify that I am the: (Check only one)

- author  owner of exclusive right(s)
- other copyright claimant  duly authorized agent of \_\_\_\_\_

Name of author or other copyright claimant, or owner of exclusive right(s) ▲

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge.

F

Typed or printed name ▼

Date ▼

Handwritten signature (X) ▼

Certificate will be mailed in window envelope to this address:

Name ▼
Number/Street/Apt ▼
City/State/ZIP ▼

**YOU MUST:**

- Complete all necessary spaces
- Sign your application in Space F

**SEND ALL ELEMENTS IN THE SAME PACKAGE:**

1. Application form
2. Nonrefundable filing fee in check or money order payable to *Register of Copyrights*

**MAIL TO:**

Library of Congress  
Copyright Office  
101 Independence Avenue, S.E.  
Washington, D.C. 20559-6000

G

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\*17 U.S.C. § 506(e): Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 409, or in any written statement filed in connection with the application, shall be fined not more than \$2,500.