

THE PLASMA PRODUCT

undocumented
copywrites

By

JoAnna Canzoneri
McCormick

Dated
March 03, 2014

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



REGISTRATION NUMBER

TX	TXU
Effective Date of Registration	
Application Received	
Deposit Received	Fee Received
One	Two

Examined By

Correspondence

TYPE OR PRINT IN BLACK INK. DO NOT WRITE ABOVE THIS LINE.

Title of This Work:	1	THE PLASMA PRODUCT	
Alternative title or title of larger work in which this work was published:			
Name and Address of Author and Owner of the Copyright:	2	JoAnna Canzoneri McCormick 342 North Atlantic Boulevard Alhambra California 91801 Phone (718) 200-1094 Fax () Email jcanzoneri101@hotmail.com	
Nationality or domicile: Phone, fax, and email:			
Year of Creation:	3	2012	
If work has been published, Date and Nation of Publication:	4	a. Date	March 03 2014 (Month, day, and year all required)
		b. Nation	
Type of Authorship in This Work:	5	<input checked="" type="checkbox"/> Text (includes fiction, nonfiction, poetry, computer programs, etc.) <input type="checkbox"/> Illustrations <input type="checkbox"/> Photographs <input type="checkbox"/> Compilation of terms or data	
Check all that this author created.			
Signature:	6	I certify that the statements made by me in this application are correct to the best of my knowledge.* Check one: <input checked="" type="checkbox"/> Author <input type="checkbox"/> Authorized agent X <i>JoAnna Canzoneri McCormick</i>	
Registration cannot be completed without a signature.			
Name and Address of Person to Contact for Rights and Permissions:	7	<input type="checkbox"/> Check here if same as #2 above. JoAnna Canzoneri McCormick 342 North Atlantic Boulevard Alhambra CA 91801 Phone (718) 200-1094 Fax () Email	
Phone, fax, and email:			

OPTIONAL

8 Certificate will be mailed in window envelope to this address:

Name	JoAnna Canzoneri McCormick
Number/Street/Apt	342 North Atlantic Boulevard
City/State/Zip	Alhambra California 91801

Complete this space only if you currently hold a Deposit Account in the Copyright Office.

9 Deposit account # _____
 Name _____

DO NOT WRITE HERE Page 1 of _____ pages

*17 USC § 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.

PLASMA

undocumented
copywrites

By

JoAnna Canzoneri
McCormick

Dated
March 03, 2014

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

REGISTRATION NUMBER

TX	TXU
Effective Date of Registration	
Application Received	
Deposit Received	
One	Two
Fee Received	

Examined By

Correspondence

TYPE OR PRINT IN BLACK INK. DO NOT WRITE ABOVE THIS LINE.

Title of This Work: Alternative title or title of larger work in which this work was published:	1	PLASMA
Name and Address of Author and Owner of the Copyright: Nationality or domicile: Phone, fax, and email:	2	JoAnna Canzoneri McCormick 342 North Atlantic Boulevard Alhambra California 91801 Phone (718) 200-1094 Fax () Email jcanzoneri101@hotmail.com
Year of Creation:	3	2012
If work has been published, Date and Nation of Publication:	4	a. Date <u>March 03 2014</u> (Month, day, and year all required) Month Day Year b. Nation
Type of Authorship in This Work: Check all that this author created.	5	<input checked="" type="checkbox"/> Text (includes fiction, nonfiction, poetry, computer programs, etc.) <input type="checkbox"/> Illustrations <input type="checkbox"/> Photographs <input type="checkbox"/> Compilation of terms or data
Signature: Registration cannot be completed without a signature.	6	I certify that the statements made by me in this application are correct to the best of my knowledge.* Check one: <input checked="" type="checkbox"/> Author <input type="checkbox"/> Authorized agent x <u>JoAnna Canzoneri McCormick</u>
OPTIONAL Name and Address of Person to Contact for Rights and Permissions: Phone, fax, and email:	7	<input type="checkbox"/> Check here if same as #2 above. JoAnna Canzoneri McCormick 342 North Atlantic Boulevard Alhambra CA 91801 Phone (718) 200-1094 Fax () Email

8 Certificate will be mailed in window envelope to this address:

Name	JoAnna Canzoneri McCormick
Number/Street/Apt	342 North Atlantic Boulevard
City/State/Zip	Alhambra California 91801

9 Deposit account # _____
Name _____

DO NOT WRITE HERE Page 1 of _____ pages

*17 USC § 508(a): 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.