

# CERTIFICATE OF RENEWAL REGISTRATION

*Juvenile* **FORM RE**  
UNITED STATES COPYRIGHT OFFICE



This certificate, issued under the seal of the Copyright Office in accordance with the provisions of section 304 of title 17, United States Code, attests that renewal registration has been made for the work identified below. The information has been made a part of the Copyright Office records.

*Donald C Curran*

ACTING REGISTER OF COPYRIGHTS  
United States of America

REGISTRATION NUMBER	
RE	254-210
EFFECTIVE DATE OF RENEWAL REGISTRATION	
(Month) MAY 29	(Year) 1985

OFFICIAL SEAL

DO NOT WRITE ABOVE THIS LINE. FOR COPYRIGHT OFFICE USE ONLY

<b>1</b> Renewal Claimant(s)	RENEWAL CLAIMANT(S), ADDRESS(ES), AND STATEMENT OF CLAIM: (See Instructions)	
	1	Name ..... Andre Norton Address ..... 682 South Lakemont, Winter Park, FL 32792 Claiming as ..... the author <small>(Use appropriate statement from instructions)</small>
	2	Name ..... Address ..... Claiming as ..... <small>(Use appropriate statement from instructions)</small>
	3	Name ..... Address ..... Claiming as ..... <small>(Use appropriate statement from instructions)</small>
<b>3</b> Author(s)	TITLE OF WORK IN WHICH RENEWAL IS CLAIMED:  SEA SIEGE	
	RENEWABLE MATTER:	
	CONTRIBUTION TO PERIODICAL OR COMPOSITE WORK: Title of periodical or composite work: ..... If a periodical or other serial, give: Vol. .... No. .... Issue Date .....	
<b>4</b> Facts of Original Registration	ORIGINAL REGISTRATION NUMBER: A 298981	ORIGINAL COPYRIGHT CLAIMANT: Harcourt, Brace and Company, Inc.
	ORIGINAL DATE OF COPYRIGHT: • If the original registration for this work was made in published form, give: DATE OF PUBLICATION: August 26, 1957 } OR { • If the original registration for this work was made in unpublished form, give: DATE OF REGISTRATION: ..... <small>(Month) (Day) (Year) (Month) (Day) (Year)</small>	

05-29-85 0149



RE 254-250	EXAMINED BY: <i>[Signature]</i>	RENEWAL APPLICATION RECEIVED:	FOR COPYRIGHT OFFICE USE ONLY
	CHECKED BY: <i>[Signature]</i>	MAY 29, 1985	
	DEPOSIT ACCOUNT FUNDS USED: <input checked="" type="checkbox"/>	REMITTANCE NUMBER AND DATE:	

DO NOT WRITE ABOVE THIS LINE. FOR COPYRIGHT OFFICE USE ONLY

**RENEWAL FOR GROUP OF WORKS BY SAME AUTHOR:** To make a single registration for a group of works by the same individual author published as contributions to periodicals (see instructions), give full information about each contribution. If more space is needed, request continuation sheet (Form RE/CON).

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Renewal for Group of Works

1	Title of Contribution: .....	Vol. .... No. .... Issue Date .....
	Title of Periodical: .....	Registration Number: .....
	Date of Publication: (Month) (Day) (Year)	
2	Title of Contribution: .....	Vol. .... No. .... Issue Date .....
	Title of Periodical: .....	Registration Number: .....
	Date of Publication: (Month) (Day) (Year)	
3	Title of Contribution: .....	Vol. .... No. .... Issue Date .....
	Title of Periodical: .....	Registration Number: .....
	Date of Publication: (Month) (Day) (Year)	
4	Title of Contribution: .....	Vol. .... No. .... Issue Date .....
	Title of Periodical: .....	Registration Number: .....
	Date of Publication: (Month) (Day) (Year)	
5	Title of Contribution: .....	Vol. .... No. .... Issue Date .....
	Title of Periodical: .....	Registration Number: .....
	Date of Publication: (Month) (Day) (Year)	
6	Title of Contribution: .....	Vol. .... No. .... Issue Date .....
	Title of Periodical: .....	Registration Number: .....
	Date of Publication: (Month) (Day) (Year)	
7	Title of Contribution: .....	Vol. .... No. .... Issue Date .....
	Title of Periodical: .....	Registration Number: .....
	Date of Publication: (Month) (Day) (Year)	

**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: Harcourt Brace Jovanovich, Inc.  
 Account Number: DA017841

**CORRESPONDENCE:** (Give name and address to which correspondence about this application should be sent.)

Name: Miss Kathryn Naughton  
 Address: Harcourt Brace Jovanovich, Inc.  
Orlando, FL 32887  
(City) (State) (ZIP)

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Fee and Correspondence

**CERTIFICATION:** I, the undersigned, hereby certify that I am the: (Check one)

renewal claimant  duly authorized agent of:

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.



Handwritten signature: (X) [Signature]  
 Typed or printed name: Richard Udell

Andre Norton  
(Name of renewal claimant)  
Administrative Vice-President  
Harcourt Brace Jovanovich, Inc.  
 Date: April 29, 1985

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Certification (Application must be signed)

Miss Kathryn Naughton  
(Name)  
Harcourt Brace Jovanovich, Inc.  
(Number, Street and Apartment Number)  
Orlando, FL 32887  
(City) (State) (ZIP code)

MAIL CERTIFICATE TO

(Certificate will be mailed in window envelope)

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Address for Return of Certificate