

CERTIFICATE OF RENEWAL REGISTRATION

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.

REGISTER OF COPYRIGHTS
United States of America

REGISTRATION NUMBER	
RE	383 510
EFFECTIVE DATE OF RENEWAL REGISTRATION	
APR 14 1988	
(Month)	(Day) (Year)

OFFICIAL SEAL

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

1 Renewal Claimant(s)	RENEWAL CLAIMANT(S), ADDRESS(ES), AND STATEMENT OF CLAIM: (See Instructions)	
	1	Name Mary Alice Norton Address 1600 Spruce Avenue, Winter Park, Florida 32789 Claiming as Author (Use appropriate statement from instructions)
	2	Name Address Claiming as (Use appropriate statement from instructions)
3	Name Address Claiming as (Use appropriate statement from instructions)	
TITLE OF WORK IN WHICH RENEWAL IS CLAIMED: <p style="text-align: center;">THE SIOUX SPACEMAN</p>		
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		
3 Author(s)	AUTHOR(S) OF RENEWABLE MATTER: <p style="text-align: center;">Alice Mary Norton (Andre Norton is pseudonym)</p>	
4 Facts of Original Registration	ORIGINAL REGISTRATION NUMBER: <p style="text-align: center;">A 452604</p>	ORIGINAL COPYRIGHT CLAIMANT: <p style="text-align: center;">Ace Books, Inc.</p>
	ORIGINAL DATE OF COPYRIGHT: • If the original registration for this work was made in published form, give: May 9, 1960 } OR { • If the original registration for this work was made in unpublished form, give: DATE OF PUBLICATION: (Month) (Day) (Year) } DATE OF REGISTRATION: (Month) (Day) (Year)	

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RE 383 510	EXAMINED BY: <i>AWB/PA</i>	RENEWAL APPLICATION RECEIVED:	FOR COPYRIGHT OFFICE USE ONLY
	CHECKED BY: <i>AWB/PA</i>	MAR 25 1988	
	CORRESPONDENCE <input type="checkbox"/> Yes	REMITTANCE NUMBER AND DATE:	
DEPOSIT ACCOUNT FUNDS USED: <input checked="" type="checkbox"/>		FUNDS RECEIVED	APR 14 1988

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

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: **Berkley Publishing Corporation**
 Account Number: **DA023868**

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

Name: **Putnam Publishing Group**
 Address: **51 Madison Avenue**
New York, NY 10010 Att. Louise Bates
(City) (State) (ZIP) (Apt.)

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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: **Alice Mary Norton**
(Name of renewal claimant)

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) *Louise Bates*
 Typed or printed name: **Louise Bates**

Date: **March 14, 1988**

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**Certification
(Application
must be
signed)**

Putnam Publishing Group

51 Madison Avenue

New York, NY 10010

(Name)

(Number, Street and Apartment Number)

Attention: Louise Bates

(City)

(State)

(ZIP code)

**MAIL
CERTIFICATE
TO**

**(Certificate will
be mailed in
window envelope)**

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**Address for
Return of
Certificate**