

# CERTIFICATE OF COPYRIGHT REGISTRATION

# FORM TX

UNITED STATES COPYRIGHT OFFICE

This certificate, issued under the seal of the Copyright Office in accordance with the provisions of section 410(a) of title 17, United States Code, attests that copyright registration has been made for the work identified below. The information in this certificate has been made a part of the Copyright Office records.

*David L. Ladd*

REGISTER OF COPYRIGHTS  
United States of America

REGISTRATION NUMBER		
TX 628-193		
TXU		
EFFECTIVE DATE OF REGISTRATION		
1	15	81
(Month)	(Day)	(Year)

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE CONTINUATION SHEET (FORM TX/CON)

<b>1</b> Title	<b>TITLE OF THIS WORK:</b> VOORLOPER	<b>PREVIOUS OR ALTERNATIVE TITLES:</b>
	If a periodical or serial give: Vol. .... No. .... Issue Date .....	
<b>PUBLICATION AS A CONTRIBUTION:</b> (If this work was published as a contribution to a periodical, serial, or collection, give information about the collective work in which the contribution appeared.)		
Title of Collective Work: ..... Vol. .... No. .... Date ..... Pages .....		

<b>2</b> Author(s)	<b>IMPORTANT:</b> Under the law, the "author" of a "work made for hire" is generally the employer, not the employee (see instructions). If any part of this work was "made for hire" check "Yes" in the space provided, give the employer (or other person for whom the work was prepared) as "Author" of that part, and leave the space for dates blank.														
	<b>1</b>	<table border="1"> <tr> <td><b>NAME OF AUTHOR:</b> Andre Norton</td> <td><b>DATES OF BIRTH AND DEATH:</b> Born ..... Died .....</td> </tr> <tr> <td>Was this author's contribution to the work a "work made for hire"? Yes..... No. <input checked="" type="checkbox"/> .....</td> <td>(Year) (Year)</td> </tr> <tr> <td><b>AUTHOR'S NATIONALITY OR DOMICILE:</b> Citizen of <u>USA</u> ..... } or { Domiciled in .....</td> <td><b>WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK:</b></td> </tr> <tr> <td>(Name of Country) (Name of Country)</td> <td>Anonymous? Yes..... No. <input checked="" type="checkbox"/> .....</td> </tr> <tr> <td><b>AUTHOR OF:</b> (Briefly describe nature of this author's contribution) Text</td> <td>Pseudonymous? Yes..... No. <input checked="" type="checkbox"/> .....</td> </tr> <tr> <td></td> <td>If the answer to either of these questions is "Yes," see detailed instructions attached.</td> </tr> </table>	<b>NAME OF AUTHOR:</b> Andre Norton	<b>DATES OF BIRTH AND DEATH:</b> Born ..... Died .....	Was this author's contribution to the work a "work made for hire"? Yes..... No. <input checked="" type="checkbox"/> .....	(Year) (Year)	<b>AUTHOR'S NATIONALITY OR DOMICILE:</b> Citizen of <u>USA</u> ..... } or { Domiciled in .....	<b>WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK:</b>	(Name of Country) (Name of Country)	Anonymous? Yes..... No. <input checked="" type="checkbox"/> .....	<b>AUTHOR OF:</b> (Briefly describe nature of this author's contribution) Text	Pseudonymous? Yes..... No. <input checked="" type="checkbox"/> .....		If the answer to either of these questions is "Yes," see detailed instructions attached.	
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<b>3</b> Creation and Publication	<b>YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED:</b> Year... 1980 ... (This information must be given in all cases.)	<b>DATE AND NATION OF FIRST PUBLICATION:</b> Date... September 29, 1980 ... (Month) (Day) (Year) Nation... USA ... (Name of Country) (Complete this block ONLY if this work has been published.)
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<b>4</b> Claimant(s)	<b>NAME(S) AND ADDRESS(ES) OF COPYRIGHT CLAIMANT(S):</b> Andre Norton c/o Larry Sternig Literary Agency 742 Robertson Street Milwaukee, Wisconsin 53213
	<b>TRANSFER:</b> (If the copyright claimant(s) named here in space 4 are different from the author(s) named in space 2, give a brief statement of how the claimant(s) obtained ownership of the copyright.)

• Complete all applicable spaces (numbers 5-11) on the reverse side of this page  
• Follow detailed instructions attached • Sign the form at line 10

TX 628-193	EXAMINED BY: <i>JH</i>	APPLICATION RECEIVED: JAN 15 1981	FOR COPYRIGHT OFFICE USE ONLY
	CHECKED BY: <i>[Signature]</i>	DEPOSIT RECEIVED: JAN 15 1981 JAN 15 1981	
	DEPOSIT ACCOUNT FUNDS USED: <i>[Signature]</i>	REMITTANCE NUMBER AND DATE:	

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED ADDITIONAL SPACE, USE CONTINUATION SHEET (FORM TX/CON)

**PREVIOUS REGISTRATION:**

- Has registration for this work, or for an earlier version of this work, already been made in the Copyright Office? Yes..... No.....
- If your answer is "Yes," why is another registration being sought? (Check appropriate box)
  - This is the first published edition of a work previously registered in unpublished form.
  - This is the first application submitted by this author as copyright claimant.
  - This is a changed version of the work, as shown by line 6 of this application.
- If your answer is "Yes," give: Previous Registration Number ..... Year of Registration .....

**5**  
Previous Registration

**COMPILATION OR DERIVATIVE WORK:** (See instructions)

PREEXISTING MATERIAL: (Identify any preexisting work or works that this work is based on or incorporates.)

MATERIAL ADDED TO THIS WORK: (Give a brief, general statement of the material that has been added to this work and in which copyright is claimed.)

**6**  
Compilation or Derivative Work

**MANUFACTURERS AND LOCATIONS:** (If this is a published work consisting preponderantly of nondramatic literary material in English, the law may require that the copies be manufactured in the United States or Canada for full protection. If so, the names of the manufacturers who performed certain processes, and the places where these processes were performed must be given. See instructions for details.)

NAMES OF MANUFACTURERS Offset Paperback Manufacturers, Inc.	PLACES OF MANUFACTURE P.O. Box N, Rt. 309, Dallas, PA 18612
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**7**  
Manufacturing

**REPRODUCTION FOR USE OF BLIND OR PHYSICALLY-HANDICAPPED PERSONS:** (See instructions)

- Signature of this form at space 10, and a check in one of the boxes here in space 8, constitutes a non-exclusive grant of permission to the Library of Congress to reproduce and distribute solely for the blind and physically handicapped and under the conditions and limitations prescribed by the regulations of the Copyright Office: (1) copies of the work identified in space 1 of this application in Braille (or similar tactile symbols); or (2) phonorecords embodying a fixation of a reading of that work; or (3) both.

a  Copies and phonorecords      b  Copies Only      c  Phonorecords Only

**8**  
License For Handicapped

<b>DEPOSIT ACCOUNT:</b> (If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.) Name: Grosset & Dunlap, Inc. Account Number: DA034886	<b>CORRESPONDENCE:</b> (Give name and address to which correspondence about this application should be sent.) Name: Grosset & Dunlap, Inc. Address: 51 Madison Ave. New York, NY 10010 Att. Louise Bates (City) (State) (ZIP)
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**9**  
Fee and Correspondence

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

author  other copyright claimant  owner of exclusive right(s)  authorized agent of: **Andre Norton**  
(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.

Handwritten signature: (X) *Louise Bates*  
Typed or printed name: Louise Bates Date: 1/7/81

**10**  
Certification (Application must be signed)

Grosset & Dunlap, Inc. (Name) 51 Madison Avenue (Number, Street and Apartment Number) New York, NY 10010 (City) (State) (ZIP code) Attention: Louise Bates	<b>MAIL CERTIFICATE TO</b>  (Certificate will be mailed in window envelope)	<b>11</b> Address For Return of Certificate
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