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LEONARD, STREET AND DEINARD

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

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MINNEAPOLIS, MINNESOTA 55402

TELEPHONE (612) 337-1500

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MAR 11 1987

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IRENE SCOTT
 M. PATRICIA SCHAFFER

OF COUNSEL

March 10, 1987

WRITER'S DIRECT DIAL NUMBER

337-1518

Ms. Sue Dosal
 State Court Administrator
 MINNESOTA SUPREME COURT
 230 State Capitol
 St. Paul, MN 55155

Re: Registration of TCIS Program and Manuals

Dear Sue:

I am pleased to report that the Register of Copyrights has issued Certificates of Copyright Registration for the TCIS Software, the Automated TCIS Training Manual, the TCIS Technical Manual, and the TCIS User's Manual. I am enclosing copies of these Certificates for your files. The originals have been placed in our vault for safekeeping. If you would prefer to keep the originals in your office, please let me know and I will send them.

These copyright registrations are good for the life of the copyright, which for a work for hire is 100 years from the date of creation or 75 years from the date of publication, whichever first occurs. To maintain your copyright, it is important to continue to use the copyright notices which we worked out for each of your works.

I understand that your computer program is being constantly revised. At some point you may feel that the revisions are substantial enough that they should be protected through an additional copyright registration. There is no rule as to exactly when this should be done. In general, when the revisions have become so substantial that they have value in themselves, the revised work should be registered.

Ms. Sue Dosal
March 10, 1987
Page Two

If you have any questions, please let me know.

Very truly yours,

LEONARD, STREET AND DEINARD

A handwritten signature in cursive script that reads "Pat".

By

M. Patricia Schaffer

MPS/vms
Enclosure

cc: Stephen J. Davidson, Esq.

CERTIFICATE OF COPYRIGHT REGISTRATION

FORM TX
UNITED STATES COPYRIGHT OFFICE



OFFICIAL SEAL

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.

REGISTER OF COPYRIGHTS
United States of America

REGISTRATION NUMBER

TXu ... 262-170

TX

EFFECTIVE DATE OF REGISTRATION

11. 24. 86.
Month Day Year

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

1 TITLE OF THIS WORK ▼

TCIS

PREVIOUS OR ALTERNATIVE TITLES ▼

PUBLICATION AS A CONTRIBUTION 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 ▼

If published in a periodical or serial give: Volume ▼ Number ▼ Issue Date ▼ On Pages ▼

2 NAME OF AUTHOR ▼

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

a State of Minnesota, State Court Administrator's Office

Was this contribution to the work a "work made for hire"? Yes No

AUTHOR'S NATIONALITY OR DOMICILE
Name of Country

OR { Citizen of ▶ USA
Domiciled in ▶

WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK

Anonymous? Yes No
Pseudonymous? Yes No

If the answer to either of these questions is "Yes," see detailed instructions.

NATURE OF AUTHORSHIP Briefly describe nature of the material created by this author in which copyright is claimed. ▼

Computer program

b NAME OF AUTHOR ▼

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"? Yes No

AUTHOR'S NATIONALITY OR DOMICILE
Name of country

OR { Citizen of ▶
Domiciled in ▶

WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK

Anonymous? Yes No
Pseudonymous? Yes No

If the answer to either of these questions is "Yes," see detailed instructions.

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c NAME OF AUTHOR ▼

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

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Name of Country

OR { Citizen of ▶
Domiciled in ▶

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Anonymous? Yes No
Pseudonymous? Yes No

If the answer to either of these questions is "Yes," see detailed instructions.

NATURE OF AUTHORSHIP Briefly describe nature of the material created by this author in which copyright is claimed. ▼

3 YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED This information must be given in all cases.

1986 ◀ Year

DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK

Complete this information ONLY if this work has been published. Month ▶ Day ▶ Year ▶

4 COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2. ▼

State of Minnesota, State Court Administrator's Office
40 North Milton Street, Suite 304
St. Paul, Minnesota 55104

APPLICATION RECEIVED

NOV 24 1986

ONE DEPOSIT RECEIVED

10.27.86

TWO DEPOSITS RECEIVED

REMITTANCE NUMBER AND DATE

TRANSFER If the 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. ▼

MORE ON BACK ▶ • Complete all applicable spaces (numbers 5-11) on the reverse side of this page.
• See detailed instructions. • Sign the form at line 10.

DO NOT WRITE HERE

NOTE
Under the law, the "author" of a "work made for hire" is generally



EXAMINED BY JA

FORM TX

CHECKED BY

TXu 262-170

CORRESPONDENCE Yes

DEPOSIT ACCOUNT FUNDS USED

FOR COPYRIGHT OFFICE USE ONLY

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

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 space 6 on this application.

If your answer is "Yes," give: Previous Registration Number ▼

Year of Registration ▼

5

DERIVATIVE WORK OR COMPILATION Complete both space 6a & 6b for a derivative work; complete only 6b for a compilation.

a. Preexisting Material Identify any preexisting work or works that this work is based on or incorporates. ▼

6

b. 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. ▼

See instructions before completing this space.

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 ▼

Places of Manufacture ▼

7

REPRODUCTION FOR USE OF BLIND OR PHYSICALLY HANDICAPPED INDIVIDUALS A signature on 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

See instructions.

8

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 ▼

9

CORRESPONDENCE Give name and address to which correspondence about this application should be sent. Name/Address/Apt/City/State/Zip ▼

M. Patricia Schaffer

LEONARD, STREET AND DEINARD, 100 South Fifth Street, Suite 1500

Minneapolis, Minnesota 55402

Area Code & Telephone Number ▶

(612) 337-1500

Be sure to give your daytime phone number.

CERTIFICATION* I, the undersigned, hereby certify that I am the

Check one ▶

author

other copyright claimant

owner of exclusive right(s)

authorized agent of State of Minnesota, State Court Administrator's Office

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.

Typed or printed name and date ▼ If this is a published work, this date must be the same as or later than the date of publication given in space 3.

M. Patricia Schaffer

date ▶

November 17, 1984

10

MAIL CERTIFICATE TO

Certificate will be mailed in window envelope

Name ▼

M. Patricia Schaffer, Esq.

Number/Street/Apartment Number ▼

Leonard, Street and Deinard
100 South Fifth Street, Suite 1500

City/State/ZIP ▼

Minneapolis, Minnesota 55402

Have you:

- Completed all necessary spaces?
- Signed your application in space 10?
- Enclosed check or money order for \$10 payable to Register of Copyrights?
- Enclosed your deposit material with the application and fee?

MAIL TO: Register of Copyrights, Library of Congress, Washington, D.C. 20559.

11

* 17 U.S.C. § 508(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.

CERTIFICATE OF COPYRIGHT REGISTRATION

FORM TX

UNITED STATES COPYRIGHT OFFICE



OFFICIAL SEAL

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.

REGISTER OF COPYRIGHTS
United States of America

REGISTRATION NUMBER

TX 1 973 606

EFFECTIVE DATE OF REGISTRATION

Month 12 Day 8 Year 86

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

TITLE OF THIS WORK ▼

1 TCIS Users Manual

PREVIOUS OR ALTERNATIVE TITLES ▼

PUBLICATION AS A CONTRIBUTION 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 ▼

If published in a periodical or serial give: Volume ▼ Number ▼ Issue Date ▼ On Pages ▼

2 NAME OF AUTHOR ▼

a State of Minnesota, State Court Administrator's Office

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"?
 Yes
 No

AUTHOR'S NATIONALITY OR DOMICILE

Name of Country USA

OR { Citizen of ▼
Domiciled in ▼

WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK

Anonymous? Yes No

Pseudonymous? Yes No

If the answer to either of these questions is "Yes," see detailed instructions.

NATURE OF AUTHORSHIP Briefly describe nature of the material created by this author in which copyright is claimed. ▼

Text of TCIS Users Manual

NAME OF AUTHOR ▼

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"?
 Yes
 No

AUTHOR'S NATIONALITY OR DOMICILE

Name of Country

OR { Citizen of ▼
Domiciled in ▼

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 No

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Name of Country

OR { Citizen of ▼
Domiciled in ▼

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Pseudonymous? Yes No

If the answer to either of these questions is "Yes," see detailed instructions.

NATURE OF AUTHORSHIP Briefly describe nature of the material created by this author in which copyright is claimed. ▼

3 YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED This information must be given in all cases.
1981

DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK Complete this information ONLY if this work has been published.
Month ▶ December Day ▶ 12 Year ▶ 1981

4 COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2.▼

State of Minnesota, State Court Administrator's Office
40 North Milton Street, Suite 304
St. Paul, Minnesota 55104

APPLICATION RECEIVED

ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED

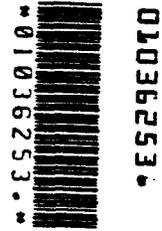
REMITTANCE NUMBER AND DATE

TRANSFER If the 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.▼

MORE ON BACK ▶ • Complete all applicable spaces (numbers 5-11) on the reverse side of this page.
• See detailed instructions. • Sign the form at line 10.

DO NOT WRITE HERE
Page 1 of 2 Pages

NOTE Under the law.



"Special relief granted under 202.20 (d) of the C. O. reg."

TX 1 973 606

EXAMINED BY

BK

FORM TX

CHECKED BY

[Signature]

CORRESPONDENCE Yes

DEPOSIT ACCOUNT FUNDS USED

FOR COPYRIGHT OFFICE USE ONLY

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

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 space 6 on this application.

If your answer is "Yes," give: Previous Registration Number Year of Registration

5

DERIVATIVE WORK OR COMPILATION Complete both space 6a & 6b for a derivative work; complete only 6b for a compilation.

a. Preexisting Material Identify any preexisting work or works that this work is based on or incorporates.

b. 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.

See instructions before completing this space.

6

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

Places of Manufacture

State Printer

St. Paul, Minnesota

7

REPRODUCTION FOR USE OF BLIND OR PHYSICALLY HANDICAPPED INDIVIDUALS A signature on 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.

- Copies and Phonorecords Copies Only Phonorecords Only

See instructions.

8

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

9

CORRESPONDENCE Give name and address to which correspondence about this application should be sent. Name/Address/Apt/City/State/Zip

M. Patricia Schaffer

LEONARD, STREET AND DEINARD, 100 South Fifth Street, Suite 1500

Minneapolis, Minnesota 55402

Area Code & Telephone Number

(612) 337-1500

Be sure to give your daytime phone number.

CERTIFICATION I, the undersigned, hereby certify that I am the

Check one

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

State of Minnesota, State Court

Administrator's Office

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.

Typed or printed name and date If this is a published work, this date must be the same as or later than the date of publication given in space 3.

Sue K. Dosal

date December 2, 1986

10

Handwritten signature (X)

[Signature: Sue K. Dosal]

MAIL CERTIFICATE TO

Certificate will be mailed in window envelope

Form with fields: Name (M. Patricia Schaffer), Number/Street/Apartment Number (LEONARD, STREET AND DEINARD, 100 South Fifth Street, Suite 1500), City/State/ZIP (Minneapolis, Minnesota 55402)

Have you:

- Completed all necessary spaces?
Signed your application in space 10?
Enclosed check or money order for \$10 payable to Register of Copyrights?
Enclosed your deposit material with the application and fee?

MAIL TO: Register of Copyrights, Library of Congress, Washington, D.C. 20559.

11

* 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.

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FORM TX

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REGISTER OF COPYRIGHTS
United States of America

REGISTRATION NUMBER

TX 1 953 677

TXU

EFFECTIVE DATE OF REGISTRATION

12 / 4 / 86
Month Day Year

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

1 TITLE OF THIS WORK ▼

Automated TCIS Training Manual

PREVIOUS OR ALTERNATIVE TITLES ▼

TCIS User's Manual

PUBLICATION AS A CONTRIBUTION 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 ▼

If published in a periodical or serial give: Volume ▼ Number ▼ Issue Date ▼ On Pages ▼

2 NAME OF AUTHOR ▼

State of Minnesota, State Court Administrator's Office

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"?

Yes
 No

AUTHOR'S NATIONALITY OR DOMICILE

Name of Country

OR { Citizen of ► USA

OR { Domiciled in ►

WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK

Anonymous? Yes No
Pseudonymous? Yes No

If the answer to either of these questions is "Yes," see detailed instructions.

NATURE OF AUTHORSHIP Briefly describe nature of the material created by this author in which copyright is claimed. ▼

Text of Manual

NAME OF AUTHOR ▼

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

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Yes
 No

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3 YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED This information must be given in all cases.

1984 ◀ Year

DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK

Complete this information ONLY if this work has been published. Month ► May Day ► ca 1 Year ► 1984 ◀ Nation

4 COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2. ▼

State of Minnesota, State Court Administrator's Office
40 North Milton St., Suite 304
St. Paul, MN 55104

APPLICATION RECEIVED

DEC 04 1986

ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED

DEC 04 1986

REMITTANCE NUMBER AND DATE

DO NOT WRITE HERE OFFICE USE ONLY

See instructions before completing this space.

TRANSFER If the 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. ▼

01008799



*Added by CO authority phone call 12-22-86 with M. Patricia Schaffer, Esq.

EXAMINED BY *[Signature]*

FORM TX

CHECKED BY

CORRESPONDENCE Yes

DEPOSIT ACCOUNT FUNDS USED

FOR COPYRIGHT OFFICE USE ONLY

TX 1 953 677

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

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) ▼

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Year of Registration ▼

5

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a. Preexisting Material Identify any preexisting work or works that this work is based on or incorporates. ▼

TCIS Users Manual - earlier text on same subject matter

b. 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. ▼

Revisions to text which was completely rewritten

See instructions before completing this space.

6

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 ▼

Places of Manufacture ▼

State Court Administrator's Office St. Paul, Minnesota

Minnesota Supreme Court

7

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b Copies Only

c Phonorecords Only

See instructions.

8

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 ▼

CORRESPONDENCE Give name and address to which correspondence about this application should be sent. Name/Address/Apt/City/State/Zip ▼

M. Patricia Schaffer, Esq., Leonard, Street and Deinard, Suite 1500, 100 South Fifth Street, Minneapolis, MN 55402

Area Code & Telephone Number ▶

Be sure to give your daytime phone number

9

CERTIFICATION* I, the undersigned, hereby certify that I am the

Check one ▶

author

other copyright claimant

owner of exclusive right(s) State of Minnesota, State

authorized agent of Court Administrator's Office

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.

Typed or printed name and date ▼ If this is a published work, this date must be the same as or later than the date of publication given in space 3.

Sue K. Dosal

date ▶

11/4/84

10



Handwritten signature (X) ▼

Name ▼	M. Patricia Schaffer, Esq., Leonard, Street and
Number/Street/Apartment Number ▼	Suite 1500 Deinard
City/State/ZIP ▼	100 South Fifth Street Minneapolis, MN 55402

MAIL CERTIFICATE TO

Certificate will be mailed in window envelope

Have you:

- Completed all necessary spaces?
- Signed your application in space 10?
- Enclosed check or money order for \$10 payable to Register of Copyrights?
- Enclosed your deposit material with the application and fee?

MAIL TO: Register of Copyrights, Library of Congress, Washington, D.C. 20559.

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UNITED STATES COPYRIGHT OFFICE



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REGISTER OF COPYRIGHTS
United States of America

REGISTRATION NUMBER

TXU 264-722

TX

TXU

EFFECTIVE DATE OF REGISTRATION

12
Month

8
Day

86
Year

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

TITLE OF THIS WORK ▼

TCIS TECHNICAL MANUAL
PREVIOUS OR ALTERNATIVE TITLES ▼

PUBLICATION AS A CONTRIBUTION 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 ▼

If published in a periodical or serial give: Volume ▼ Number ▼ Issue Date ▼ On Pages ▼

NAME OF AUTHOR ▼

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

State of Minnesota, State Court Administrator's Office

Was this contribution to the work a "work made for hire"?
 Yes
 No

AUTHOR'S NATIONALITY OR DOMICILE
Name of Country
OR { Citizen of ▶ U.S.A.
Domiciled in ▶

WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK
Anonymous? Yes No
Pseudonym? Yes No

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