

CERTIFICATE OF RENEWAL REGISTRATION

FORM RE

UNITED STATES COPYRIGHT OFFICE



OFFICIAL SEAL

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 334-248
EFFECTIVE DATE OF RENEWAL REGISTRATION	MAR 23 1987 (Month) (Day) (Year)

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 Andre Norton Address 1600 Spruce Avenue, Winter Park, Florida 32739 Claiming as 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>

2 Work Renewed	TITLE OF WORK IN WHICH RENEWAL IS CLAIMED: GALACTIC DERELICT
	RENEWABLE MATTER:

012618000 *012618000*	CONTRIBUTION TO PERIODICAL OR COMPOSITE WORK: Title of periodical or composite work: If a periodical or other serial, give: Vol. No. Issue Date
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AUTHOR(S) OF RENEWABLE MATTER: Andre Norton
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4 Facts of Original Registration	ORIGINAL REGISTRATION NUMBER: A 422426	ORIGINAL COPYRIGHT CLAIMANT: Andre Norton
	ORIGINAL DATE OF COPYRIGHT: • If the original registration for this work was made in published form, give: DATE OF PUBLICATION: October 19, 1959 (Month) (Day) (Year)	
		• If the original registration for this work was made in unpublished form, give: DATE OF REGISTRATION: (Month) (Day) (Year)

RE

334-248

EXAMINED BY: *HW*
 CHECKED BY:
 CORRESPONDENCE
 Yes
 DEPOSIT ACCOUNT FUNDS USED:

RENEWAL APPLICATION RECEIVED:
MAR 23. 1987
 REMITTANCE NUMBER AND DATE:

FOR
 COPYRIGHT
 OFFICE
 USE
 ONLY

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: 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: **Putnam Publishing Group**
 Account Number: **DA038288**

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 (Apt.)
 (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: **Andre 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: **3/17/87**

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Certification
 (Application
 must be
 signed)

Putnam Publishing Group
 (Name)
51 Madison Avenue
 (Number, Street and Apartment Number)
New York, NY 10010 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