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☐ This is the first published edition of a work previously registered in unpublished form.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 ▼

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

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 3 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

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 ▼ Grove/Atlantic, Inc.  Account Number ▼ DA061131

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

Mary Flower / Grove/Atlantic  841 Broadway  New York, New York 10003

Area Code & Telephone Number ▼  (212) 614-7881

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

Check one ▼
☐ author
☐ other copyright claimant
☐ owner of exclusive right(s)
☐ authorized agent of  Fay Weldon  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 application gives a date of publication in space 3, do not sign and submit it before that date.

Mary Flower ▼  date ▼ 6/15/95

Handwritten signature (X) ▼

MAIL CERTIFICATE TO

Mary Flower / Grove/Atlantic
Number Street Apartment Number ▼
841 Broadway ▼
City State ZIP ▼
New York, New York 10003

YOU MUST

☐ Complete all necessary spaces.
☐ Sign your application in space 10.
SEND ALL 3 ELEMENTS IN THE SAME PACKAGE.

1. Application form.
2. Non-refundable $100 filing fee.
3. Deposit material.
MAIL TO

Register of Copyrights
Library of Congress
Washington, D.C. 20559

February 1990—200 000

U.S. GOVERNMENT PRINTING OFFICE: 1990–262–308 11
Case 1:11-cv-06351-HB  Document 99-4    Filed 06/29/12   Page 3 of 17

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

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See instructions before completing this space

REPRODUCTION FOR USE OF BLIND OR PHYSICALLY HANDICAPPED INDIVIDUALS A signature on this form at space 10, and a

☑ simple braille or other popularly used non-exclusively 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.

Space 8 deleted.

☑ Copies and Phonorecords
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Name ▼ Account Number ▼
Mary Flower DA061131

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Name Address/ATL City/State/Zip ▼
Mary Flower / Grove/Atlantic
841 Broadway
New York, New York 10003

Area Code & Telephone Number ▼
(212) 614-7881

CERTIFICATION The undersigned hereby certify that I am the ▼

☐ author
☐ other copyright claimant
☐ owner of exclusive right(s)
☐ authorized agent of [Signature] ▼

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 application gives a date of publication in space 3, do not sign and submit it before that date.

Mary Flower 6/20/96

Handwritten signature (X) ▼

MAIL CERTIFICATE TO

Certificate will be mailed in window envelope

Name ▼ Mary Flower / Grove/Atlantic
Number Street Apartment Number ▼ 841 Broadway
City State ZIP ▼ New York, New York 10003

YOU MUST

☐ Complete all necessary spaces
☐ Sign this application at space 10

SEND ALL 3 ELEMENTS IN THE SAME PACKAGE:

☐ Application form
☐ Non-refundable $10 living fee in check or money order payable to Register of Copyrights
☐ Deposit material

Mail to:
Library of Congress
Register of Copyrights
Washington, DC 20559

February 1990—200.000

U.S. GOVERNMENT PRINTING OFFICE: 1990—262-038 11
**Title of this work ▼**  
WICKED WOMEN

**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 ▼**  
Fay Weldon

**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 ▼**  **Citizen of ▼**  **Domiciled in ▼**

**Was this author's contribution to the work Anonymous?**  
☐ Yes  ☑ No

**Anonymous?**  
☐ Yes  ☑ No

**Pseudonymous?**  
☐ Yes  ☑ No

**Nature of authorship**  
Briefly describe nature of the material created by this author in which copyright is claimed. ▼

**Name of author ▼**

**Dates of birth and death**  
**Year Born ▼**  **Year Died ▼**

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**Anonymous?**  
☑ Yes  ☑ No

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☑ Yes  ☑ No

**Nature of authorship**  
Briefly describe nature of the material created by this author in which copyright is claimed. ▼

**Year in which creation of this work was completed**  
1997  ▶ Year

**Date and nation of first publication of this particular work**  
Complete this information month ▶ June  Day ▶ 23 Year ▶ 1997

**United States of America ▶ Nation**

**Copyright claimant(s)** Name and address must be given even if the claimant is the same as the author given in space 2.▼  
Fay Weldon  
c/o Ed Victor Ltd  
6 Bayley Street  
London WC1B 3HB, England

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

   All but 6 stories previously published

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. ▼

6 stories are new

---space deleted---

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

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 ▼  Grove/Atlantic, Inc.

Account Number ▼  DA061131

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

Mary Flower / Grove/Atlantic
841 Broadway
New York, New York 10003

Area Code & Telephone Number ▼  212 614 7881

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

☑ author  ☐ other copyright claimant  ☐ 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.

☑ authorized agent of  Fay Weldon

Name of author or other copyright claimant, or owner of exclusive right(s) ▼

Typed or printed name and date ▼  If this application gives a date of publication in space 3, do not sign and submit it before that date.

Mary Flower  date ▼  6/23/97

Handwritten signature (X) ▼

Mail Certificate to

Mary Flower / Grove/Atlantic

Address ▼  841 Broadway

City State ZIP ▼  New York, New York 10003

February 1990 - 200,000
**DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.**

**TITLE OF THIS WORK ▼**

BIG WOMEN

**PREVIOUS OR ALTERNATIVE TITLES ▼**

**PUBLICATION AS A CONTRIBUTION ▼**
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 ▼**

<table>
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<tr>
<th>Volume ▼</th>
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<th>Issue Date ▼</th>
<th>On Pages ▼</th>
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<td>Year Born ▼</td>
<td>Anonymous? [ ] Yes [ ] No [ ] Pseudonymous ▼</td>
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**NOTE ▼**
Under the law, the "author" of a "work made for hire" is generally the employer, not the employee (see instructions). For any part of this work that 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 of birth and death blank.

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**YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED ▼**

1997

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<th>COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2. ▼</th>
<th>DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK ▼</th>
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| Fay Weldon
3A Greenaway Gardens
Hampstead
London NW3 7DJ, England |

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**TRANSFER ▼**
If the claimant(s) named here in space 4 is (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.
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b. This is the first application submitted by this author as copyright claimant.
c. This is a changed version of the work, as shown by space 6 on this application.

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—space deleted—

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Name ▼ Account Number ▼

Grove/Atlantic, Inc. DA061131

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

Mary Flower / Grove/Atlantic

841 Broadway

New York, New York 10003

Area Code and Telephone Number ▼ 212 614 7881

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

☐ author ☐ other copyright claimant

❑ owner of exclusive right(s)

☐ authorized agent of Ray Weldon

Name of owner or other copyright claimant, or owner of exclusive right(s) ▼

Typed or printed name and date ▼ If this application gives a date of publication in space 3, do not sign and submit it before that date.

Mary Flower 9/8/98

Handwritten signature (X) ▼

MAIL CERTIFICATE TO Certificate will be mailed in window envelope

Name ▼

Mary Flower / Grove/Atlantic

Number/Street/Apartment Number ▼

841 Broadway

City/State/ZIP ▼

New York, New York 10003

(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 this section, or in any written statement filed in connection with the application, shall be fined not more than $2,500.

July 1993—400,000 PRINTED ON RECYCLED PAPER U.S. GOVERNMENT PRINTING OFFICE: 1993-342-582/50C
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Case 1:11-cv-06351-HB   Document 99-4   Filed 06/29/12   Page 10 of 17

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

TITLE OF THIS WORK ▼
RHODE ISLAND BLUES

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 ▼
Fay Weldon

AUTHOR’S NATIONALITY OR DOMICILE
Name of Country
OR
Citizen of ▼ U.K.,
Domiciled in ▼

WAS THIS AUTHOR’S CONTRIBUTION TO THE WORK
Anonymous? □ Yes □ No
Pseudonymous? □ Yes □ No

DATE OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

DATE OF DEATH

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

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Name of Country
OR
Citizen of ▼
Domiciled in ▼

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Year Born ▼ Year Died ▼

DATE OF DEATH

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

YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED 2000

DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK
Month ▼ November ▼ Day ▼ 20 ▼ Year ▼ 2000 ▼ United States of America ▼ Nation

COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2. ▼ Fay Weldon
3A Greenaway Gardens
Hampstead
London NW3 7DL, England

TRANSFER If the claimant(s) named here in space 4 is (are) different from the author(s) named in space 2, give a brief statement of how the claimant(s) obtained ownership of the copyright. ▼
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Name/Address/Apt/City/State/ZIP ▼

   b. Mary Flower / Grove/Atlantic
     841 Broadway
     New York, New York 10003

     Area code and daytime telephone number ▼ 212 614 7881
     Fax number ▼ 212 614 7886

CERTIFICATION* I, the undersigned, hereby certify that I am the
Check only one ▼
   ☐ author
   ☐ other copyright claimant
   ☐ owner of exclusive right(s)
   ☐ authorized agent of Pay Weldon 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 application gives a date of publication in space 3, do not sign and submit it before that date
Mary Flower Date ▼ 4/24/2001

Handwritten signature (X) ▼

The filing fee of $20.00 is effective through December 31, 1998. After that date, please write the Copyright Office
Check the Copyright Office Website at http://www.loc.gov/copyright, or call (202) 707-3000 for the latest fee information.

Mail certificate to:
Name ▼ Mary Flower / Grove/Atlantic
Number/Street/Apt ▼ 841 Broadway
City/State/ZIP ▼ New York, New York 10003

YOU MUST
• Complete all necessary spaces
• Sign your application in space 8
SEND ALL 3 ELEMENTS
• Application form
• Nonrefundable filing fee in check or money order payable to Register of Copyrights
• Deposit material
MAIL TO
Library of Congress
Copyright Office
101 Independence Avenue, S.E.
Washington, D.C. 20559-6000

*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.

September 1997—300,000 ☐ PRINTED ON RECYCLED PAPER

U.S. GOVERNMENT PRINTING OFFICE: 1997-417/750-00.021
**DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.**

**TITLE OF THIS WORK ▼**

**AUTO DA FAY**

**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 ▼**

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</table>

**NAME OF AUTHOR ▼**

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<th>Fay Weldon</th>
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**AUTHOR'S NATIONALITY OR DOMICILE**

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<th>Name or County</th>
<th>UK</th>
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- **WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK?**

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- **Pseudonymous?**

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**DATE OF BIRTH AND DEATH**

<table>
<thead>
<tr>
<th>Year Born ▼</th>
<th>Year Died ▼</th>
</tr>
</thead>
</table>

| 1931 |

**NATURE OF AUTHORSHIP**

Briefly describe nature of material created by this author in which copyright is claimed.

**ENTIRE TEXT**

**NOTE**

Under the law, the "author" of a "work made for hire" is generally the employer, not the employee (see instructions). For any part of this work that 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 of birth and death blank.

**NAME OF AUTHOR ▼**

- **WAS THIS CONTRIBUTION TO THE WORK "WORK MADE FOR HIRE"?**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

**AUTHOR'S NATIONALITY OR DOMICILE**

<table>
<thead>
<tr>
<th>Name or County</th>
<th>UK</th>
</tr>
</thead>
</table>

**DATE OF BIRTH AND DEATH**

<table>
<thead>
<tr>
<th>Year Born ▼</th>
<th>Year Died ▼</th>
</tr>
</thead>
</table>

**NATURE OF AUTHORSHIP**

Briefly describe nature of material created by this author in which copyright is claimed.

**NAME OF AUTHOR ▼**

- **WAS THIS CONTRIBUTION TO THE WORK "WORK MADE FOR HIRE"?**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

**AUTHOR'S NATIONALITY OR DOMICILE**

<table>
<thead>
<tr>
<th>Name or County</th>
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</tr>
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</table>

**DATE OF BIRTH AND DEATH**

<table>
<thead>
<tr>
<th>Year Born ▼</th>
<th>Year Died ▼</th>
</tr>
</thead>
</table>

**NATURE OF AUTHORSHIP**

Briefly describe nature of material created by this author in which copyright is claimed.

**YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED**

| 2002 |

**DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK**

<table>
<thead>
<tr>
<th>Month ▼</th>
<th>June</th>
<th>Day ▼</th>
<th>24</th>
<th>Year ▼</th>
<th>2002</th>
<th>Nation</th>
</tr>
</thead>
</table>

**COPYRIGHT CLAIMANT(S)**

Name and address must be given even if the claimant is the same as the author given in space 2.

<table>
<thead>
<tr>
<th>Fay Weldon</th>
</tr>
</thead>
</table>

3A Greenaway Gardens
Hampstead
London NW3 7DJ, England

**TRANSFER**

If the claimant(s) named here in space 4 is (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 5-9) on the reverse side of this page.
- See detailed instructions.
- Sign the form at line 8.

**APPLICATION RECEIVED**

| MAY 3, 2003 |

**ONE DEPOSIT RECEIVED**

| MAY 3, 2003 |

**TWO DEPOSITS RECEIVED**

**FUNDS RECEIVED**

**DO NOT WRITE HERE**

Page 1 of ___ ▼, pages.
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) □

a. ☐ This is the first published edition of a work previously registered in unpublished form.

b. ☐ This is the first application submitted by this author as copyright claimant.

c. ☐ 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 □

DERIVATIVE WORK OR COMPILATION

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 □

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 □

Grove/Atlantic, Inc.  DA061131

CORRESPONDENCE

Give name and address to which correspondence about this application should be sent.

Name/Address/Apt/City/State/ZIP □

Mary Flower / Grove/Atlantic

841 Broadway

New York, New York 10003

Area code and daytime telephone number □ 212 614 7881

Fax number □

CERTIFICATION

I, the undersigned, hereby certify that I am the □ author

☐ other copyright claimant

☐ owner of exclusive right(s)

☐ authorized agent of Fay Weldon

Name of author or other copyright claimant, or owner of exclusive right(s) □

Typed or printed name and date □

If this application gives a date of publication in space 5, do not sign and submit it before that date.

Mary Flower  Date □ 5/6/03

Handwritten signature □

X Mary Flower

The filing fee of $20.00 is effective through December 31, 1998. After that date, please write the Copyright Office, check the Copyright Office Website at http://www.loc.gov/copyright, or call (202) 707-3000 for the latest fee information.
Copyright Office fees are subject to change. For current fees, check the Copyright Office website at www.copyright.gov, write the Copyright Office, or call (202) 707-3000.

---

**Case 1:11-cv-06351-HB   Document 99-4    Filed 06/29/12   Page 14 of 17**

---

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

**TITLE OF THIS WORK ▼**

She May Not Leave

**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 ▼**

Fay Weldon

**DATES OF BIRTH AND DEATH**

**Year Born ▼** **Year Died ▼**

**AUTHOR'S NATIONALITY OR DOMICILE**

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

- [ ] Yes
- [ ] No

**WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK**

- [ ] Anonymous?
- [ ] Yes, □ No

**Pseudonymous?**

- [ ] Yes, □ No

**NOTE** Under the law, the "author" of a "work made for hire" is generally the employer, not the employee (see instructions). For any part of this work that 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 of birth and death blank.

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

---

**NAME OF AUTHOR ▼**

**DATES OF BIRTH AND DEATH**

**Year Born ▼** **Year Died ▼**

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- [ ] Yes, □ No

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**Year Born ▼** **Year Died ▼**

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- [ ] Yes, □ No

**Pseudonymous?**

- [ ] Yes, □ No

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**YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED**

**DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK**

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

Fay Weldon, c/o Kim Witherspoon, Inkwell Management, 521 Fifth Avenue, New York, NY 10175

**TRANSFER** If the claimant(s) named here in space 4 is (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 5-9) on the reverse side of this page.
- [ ] See detailed instructions.
- [ ] Sign the form at line 6.

---

**APPLICATION RECEIVED**

6-20-06

**ONE DEPOSIT RECEIVED**

6-20-06

**TWO DEPOSITS RECEIVED**

6-20-06

**FUNDS RECEIVED**

6-20-06

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**DO NOT WRITE HERE**

Page 1 of _______ pages
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.) ▼
  a. ☐ This is the first published edition of a work previously registered in unpublished form.
  b. ☐ This is the first application submitted by this author as copyright claimant.
  c. ☐ 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 ▶

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Preexisting Material Identify any preexisting works 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. ▼

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 ▶
Grove/Atlantic, Inc. DA061131

CORRESPONDENCE Give name and address to which correspondence about this application should be sent.
Name/Address/Apt/City/State/ZIP ▶
Janet Picknally, Editorial Production Coordinator, Grove/Atlantic, Inc.
841 Broadway, 4th Floor
New York, NY 10003

Area code and daytime telephone number ▶ 212-614-7953 Fax number ▶ 212-475-6466
Email ▶ janet.picknally@groveatlantic.com

CERTIFICATION* I, the undersigned, hereby certify that I am the
Check only one ▶
☐ author
☐ other copyright claimant
☐ owner of exclusive right(s)
☐ authorized agent of Fay Weldon
  Name of author or other copyright claimant, or owner of exclusive right(s) ▶
Typed or printed name and date ▶ If this application gives a date of publication in space 3, do not sign and submit it before that date.
Janet F. Picknally Date ▶ 09/27/06
Handwritten signature (X) ▶

Certificate will be mailed in window envelope to this address:
Name ▶ Janet Picknally, Grove/Atlantic, Inc.
Number/Street/Apt ▶ 841 Broadway, 4th Floor
City/State/ZIP ▶ New York, NY 10003

17 U.S.C. § 505(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.

Rev: July 2003—xx Web Rev: July 2003 @ Printed on recycled paper
Title

Title of Work: The Spa

Completion/Publication

Year of Completion: 2007

Date of 1st Publication: September 15, 2007

Nation of 1st Publication: United States

Author

Author: Fay Weldon

Author Created: text

Work made for hire: No

Citizen of: United Kingdom

Domiciled in: United Kingdom

Copyright claimant

Copyright Claimant: Fay Weldon

c/o InkWell Management, 521 Fifth Avenue, 26th floor, New York, NY, 10175, United States

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Organization Name: Grove/Atlantic, Inc.

Email: permissions@groveatlantic.com

Address: 841 Broadway

New York, NY 10003 United States

Certification

Name: Mary Flower

Date: January 13, 2010
Registration #: TX0007138911

Service Request #: 1-313059249

Grove/Atlantic, Inc.
Mary Flower
841 Broadway
New York, NY 10003 United States