

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.

David L. Ladd

REGISTER OF COPYRIGHTS
United States of America

Juvenile

REGISTRATION NUMBER	
RE	84-396
EFFECTIVE DATE OF RENEWAL REGISTRATION	
(Month) FEB	(Day) 17 (Year) 1981

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 682 South Lakemont, Winter Park, FL 32789 Claiming as the 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: STAR RANGERS	
	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: Andre Norton	
4 Facts of Original Registration	ORIGINAL REGISTRATION NUMBER: A 103206	ORIGINAL COPYRIGHT CLAIMANT: Harcourt, Brace and Company, Inc.
	ORIGINAL DATE OF COPYRIGHT: • If the original registration for this work was made in published form, give: DATE OF PUBLICATION: . . . August 20, 1953 . . . } OR { <small>(Month) (Day) (Year)</small>	
		• If the original registration for this work was made in unpublished form, give: DATE OF REGISTRATION: <small>(Month) (Day) (Year)</small>

RE

84-396

EXAMINED BY: *SO*
CHECKED BY:

RENEWAL APPLICATION RECEIVED:
17 FEB 1981

DEPOSIT ACCOUNT FUNDS USED:

REMITTANCE NUMBER AND DATE:

FOR
COPYRIGHT
OFFICE
USE
ONLY

DO NOT WRITE ABOVE THIS LINE

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

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: **HARCOURT BRACE JOVANOVIH, INC.**
Account Number: **DAO17841**

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

Name: **Miss Carolyn Oill**
Address: **Harcourt Brace Jovanovich, Inc.**
757 Third Avenue, New York, NY 10017
(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) **Richard Udell** Vice President

Typed or printed name: **HARCOURT BRACE JOVANOVIH, INC.**

Date: **2/5/81**

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Certification
(Application
must be
signed)

Miss Carolyn Oill
Harcourt, Brace Jovanovich, Inc.
(Name)
757 Third Avenue
(Number, Street and Apartment Number)
New York, NY 10017
(City) (State) (ZIP code)

MAIL
CERTIFICATE
TO

(Certificate will
be mailed in
window envelope)

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Address for
Return of
Certificat