

CERTIFICATE OF REGISTRATION



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

Marybeth Peters

TX 5-169-975



TX0005169975

EFFECTIVE DATE OF REGISTRATION

31 MAR 2000

Month Day Year

CONTINUATION SHEET.

1 TITLE OF THIS WORK ▼ *United States of America*

AN APPARENT INVARIANCE OF THE SIZE DISTRIBUTION OF PERSONAL INCOME CONDITIONED ON EDUCATION

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 a NAME OF AUTHOR ▼

John Chester Angle III

DATES OF BIRTH AND DEATH

Year Born ▼ Year Died ▼
1946

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

Yes
 No

AUTHOR'S NATIONALITY OR DOMICILE

Name of Country
OR { Citizen of ► United States
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 material created by this author in which copyright is claimed. ▼
Entire Text

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

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

3 a YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED
1993
This information must be given in all cases.

b DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK
Month ► August Day ► 10 Year ► 1993
United States of America
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. ▼

John Chester Angle III
Post Office Box 429
Cabin John, Maryland 20818-0429

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. ▼

APPLICATION RECEIVED

MAR 31 2000

ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED

MAR 31 2000

FUNDS RECEIVED

DO NOT WRITE HERE OFFICE USE ONLY

EXAMINED BY _____

CHECKED BY _____

CORRESPONDENCE
Yes

FOR
COPYRIGHT
OFFICE
USE
ONLY

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

5

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 ►

a 6

See instructions before completing this space.

DERIVATIVE WORK OR COMPILATION
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. ▼

a 7

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 ▼

b

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

Stephen Christopher Swift
2231 Crystal Drive, Suite 500
Arlington VA 22202-3736

Fax number ► (703) 486-5757

Area code and daytime telephone number ► (703) 418-0000

Email ► scswift@erols.com

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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 John Chester Angle III
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.
Stephen Christopher Swift Date ► March 30, 2000

Handwritten signature (X) ▼
X Stephen Christopher Swift

Certificate will be mailed in window envelope to this address:

Name ▼	Stephen Christopher Swift
Number/Street/Apt ▼	2231 Crystal Drive, Suite 500
City/State/ZIP ▼	Arlington VA 22202-3736

YOU MUST:

- Complete all necessary spaces
- Sign your application in space 8

SEND ALL 3 ELEMENTS IN THE SAME PACKAGE

1. Application form
2. Nonrefundable filing fee in check or money order payable to *Register of Copyrights*
3. Deposit material

MAIL TO
Library of Congress
Copyright Office
101 Independence Avenue, S.E.
Washington, D.C. 20559-6000

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As of July 1, 1999, the filing fee for Form TX is \$30.

*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.