REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

ADDRESS (number and street) ☐ Check if different than previously reported
412 First Street, SE, Suite 300

CITY, STATE and ZIP CODE
Washington, DC 20003

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
MAR 22 11 53 AM '99

2. FEC IDENTIFICATION NUMBER
C00022343

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☒ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____

☐ Thirtieth day report following the General Election on
_____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 02/01/99 through 02/28/99		
6.	(a) Cash on Hand January 1, 19 99		$ 80,606.00
	(b) Cash on Hand at Beginning of Reporting Period	$ 103,561.51	
	(c) Total Receipts (from Line 19)	$ 22,092.12	$ 46,047.63
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 125,653.63	$ 126,653.63
7.	Total Disbursements (from Line 30)	$ 21,000.00	$ 22,000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 104,653.63	$ 104,653.63
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Paul Equale

Signature of Treasurer
Paul Equale

Date 3/17/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

4-00173

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Independent Insurance Agents of America Political Action Committee (InsurPac)

REPORT COVERING PERIOD FROM: 02/01/99 TO: 02/28/99

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	8,250.00	26,000.00	11(a)(i)
ii. Unitemized	13,810.00	19,980.00	11(a)(ii)
iii. Total (add i and ii) ➤	22,060.00	45,980.00	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	22,060.00	45,980.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	32.12	67.63	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	22,092.12	46,047.63	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	22,092.12	46,047.63	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	21,000.00	22,000.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	21,000.00	22,000.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	21,000.00	22,000.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	22,060.00	45,980.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	22,060.00	45,980.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	0.00	37

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 4

FOR LINE NUMBER 11a1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Steve Ritchie 1931 N. Meacham Road Suite 106 Schaumburg, IL 60173-4364 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Steve Ritchie & Associates,Inc President Aggregate Year-to-Date $ 250.00	02/17/99	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
David D. Gibson PO Box 610 Plymouth, IN 46563 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Gibson Insurance Agency, Inc. President Aggregate Year-to-Date $ 250.00	02/17/99	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Lukens 24 North Sixth St. P.O. Box 900 Terre Haute, IN 47808-0900 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Forrest Sherer, Inc. Insurance Agent Aggregate Year-to-Date $ 250.00	02/17/99	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ronald A. Smith CPCU 124 East 8th Street PO Box 648 Rochester, IN 46975-0648 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Smith, Sawyer & Smith, Inc. President Aggregate Year-to-Date $ 500.00	02/17/99	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Wayne L. Thompson 401 W. Jackson PO Box 298 Parker City, IN 47368-0298 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Thompson Insurance Insurance Agent Aggregate Year-to-Date $ 250.00	02/17/99	250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
J. Perry Wolfe PO Box 150 Scobey, MT 59263-0150 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Wolfe-Daniels Agency, Inc. Insurance Agent Aggregate Year-to-Date $ 250.00	02/17/99	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William C. Bloomquist P O Drawer 1235 1201 F Avenue Douglas, AZ 85608 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Bloomquist Insurance Agency Insurance Agent Aggregate Year-to-Date $ 250.00	02/17/99	250.00

SUBTOTAL of Receipts This Page (optional) 2,000.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard E. French P.O. Drawer 990 Sedona, AZ 86336 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Ayres & French, Inc. Occupation: Insurance Agent Aggregate Year-to-Date > $ 250.00	02/17/99	250.00
B. Andrew J. Valdivia P.O. Box 70 Santa Monica, CA 90406-0070 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	White & Company Insurance Occupation: Senior Vice President Aggregate Year-to-Date > $ 250.00	02/17/99	250.00
C. David Stanton PO Box 5548 Fort Lauderdale, FL 33310-5548 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Gateway Insurance Agency, Inc. Occupation: President Aggregate Year-to-Date > $ 500.00	02/17/99	500.00
D. Alejandro Soto CPCU, ARM 9500 South Dadeland Blvd. Suite 200 Miami, FL 33156-2824 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	InSource, Inc. Occupation: President Aggregate Year-to-Date > $ 250.00	02/17/99	250.00
E. Frank Richard 342 Park Ave. PO Box 639 Woonsocket, RI 02895-5360 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Estan & Richard Agency, Inc. Occupation: President Aggregate Year-to-Date > $ 250.00	02/17/99	250.00
F. Kelly McKenzie AAI 3715 Northside Parkway Atlanta, GA 30327-2813 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Merritt & McKenzie, Inc. Occupation: Insurance Agent Aggregate Year-to-Date > $ 250.00	02/17/99	250.00
G. Jackson H. Sherrill PO Box 15445 Savannah, GA 31416-2145 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Sherrill & Company Occupation: Managing Partner Aggregate Year-to-Date > $ 250.00	02/17/99	250.00

SUBTOTAL of Receipts This Page (optional) 2,000.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 4

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Randall Tanner 5405 Barfield Rd. Suite 100 Atlanta, GA 30328-4275 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tanner & Ballew President Aggregate Year-to-Date $ 250.00	02/17/99	250.00
B. Larry M. Hauer P O Box 1847 Sparks, NV 89432-1847 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Heuer Insurance Agency Inc. Insurance Agent Aggregate Year-to-Date $ 250.00	02/17/99	250.00
C. Marc S. Kaplan 5520 Wellesley Street Suite 207 La Mesa, CA 91942-4401 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aspen Insurance Brokers Insurance Agent Aggregate Year-to-Date $ 250.00	02/17/99	250.00
D. Sidney M. Banack Jr. PO Box 130 Vero Beach, FL 32961 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Sid Banack Insurance Agency, Inc. President Aggregate Year-to-Date $ 500.00	02/26/99	500.00
E. Lynn W. Mathis CPCU PO Box 450289 Atlanta, GA 31145-0289 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Williams Turner & Mathis, Inc. Insurance Agent Aggregate Year-to-Date $ 250.00	02/26/99	250.00
F. Edward W. Bowman 361 Frontage Road #145 Burr Ridge, IL 60521 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Stewart-Keator-Kessberger & Lederer, Inc President Aggregate Year-to-Date $ 250.00	02/26/99	250.00
G. David J. Sabathne 1243 S. Oak Street West Chicago, IL 60185-3923 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Family Investment Insurance Agent Aggregate Year-to-Date $ 250.00	02/26/99	250.00

SUBTOTAL of Receipts This Page (optional) 2,000.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 4 OF 4

FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Raymond D. Gallant P.O. Box 975 Acton, MA 01720 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Gallant Insurance Agency Occupation: Insurance Agent Aggregate Year-to-Date > $ 500.00	02/26/99	500.00
B. Philip Wolff Jr. 611 National Ave. Las Vegas, NM 87701 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Northern Insurance, Inc. Occupation: President Aggregate Year-to-Date > $ 250.00	02/26/99	250.00
C. Eugene P. Earick PO Box 3608 44 Sturges Avenue Mansfield, OH 44907 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Roby-Foster-Miller-Earick Agency, Inc. Occupation: Secretary/Treasurer Aggregate Year-to-Date > $ 500.00	02/26/99	500.00
D. John Braddy PO Box 968 Dillon, SC 29536-0968 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Braddy Insurance, Inc. Occupation: Vice President Aggregate Year-to-Date > $ 250.00	02/26/99	250.00
E. Vance Stine 214 S Main Street P.O. Box 597 Clover, SC 29710 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Sifford-Stine Insurance Agency Occupation: Insurance Agent Aggregate Year-to-Date > $ 250.00	02/26/99	250.00
F. Dane Leavitt 216 South 200 West PO Box 130 Cedar City, UT 84721 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Leavitt Group Agency Occupation: Insurance Agent Aggregate Year-to-Date > $ 250.00	02/26/99	250.00
G. Richard G. Taylor P.O. Box 11809 Salt Lake City, UT 84147 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Grant-Hatch & Associates, Inc. Occupation: President Aggregate Year-to-Date > $ 250.00	02/26/99	250.00

SUBTOTAL of Receipts This Page (optional)	2,250.00
TOTAL This Period (last page this line number only)	8,250.00

4-00113

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Lazio for Congress PO Box 6063 Bay Shore, NY 11706	Rick Lazio, U.S. HOUSE 2nd NY [X] Primary [ ] General [ ] Other (specify) 2000	02/05/99	500.00
B. Democratic Senatorial Campaign Committee 430 South Capitol Street, SE Washington, DC 20003	1999 Party Contribution [ ] Primary [ ] General [ ] Other (specify) 1999	02/05/99	10,000.00
C. Georgians for Isakson PO Box 71955 Marietta, GA 30007-1955	Johnny Isakson, U.S. HOUSE 6th GA [X] Primary [ ] General [ ] Other (specify) 1999	02/10/99	1,000.00
D. New Democratic Network 501 Capitol Court, NE Suite 200 Washington, DC 20002	1999 PAC to PAC contribution [ ] Primary [ ] General [ ] Other (specify) 1999	02/10/99	1,000.00
E. Joe Lieberman for US Senate One Commercial Plaza 21st Floor Hartford, CT 06103	Joe Lieberman, U.S. SENATE CT [X] Primary [ ] General [ ] Other (specify) 2000	02/10/99	1,000.00
F. Pete King for Congress Committee PO Box 1428 Seaford, NY 11783	Pete King, U.S. HOUSE 3rd NY [X] Primary [ ] General [ ] Other (specify) 2000	02/10/99	500.00
G. Friends of Ronnie Shows PO Box 3862 Jackson, MS 39207	Ronnie Shows, U.S. HOUSE 4th GA [X] Primary [ ] General [ ] Other (specify) 2000	02/10/99	1,000.00
H. The Capital Grille 601 Pennsylvania Avenue, NW Washington, DC 20004	In-kind contribution to ARMPAC / 1999 PAC to [ ] Primary [ ] General [X] Other (specify) 1999year	02/10/99	2,611.00 (In-Kind)
I. ARMPAC (Americans for a Republican Majority PAC) 117 Second Street, NE Suite 2 Washington, DC 20002	In-kind contribution to ARMPAC / 1999 PAC to [ ] Primary [ ] General [X] Other (specify) 1999year	02/10/99	2,611.00 (Memo In-Kind)

SUBTOTAL of Disbursements This Page (optional) 17,611.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Kerrey for U.S. Senate 3412 P Street, NW Washington, DC 20007	Bob Kerrey, U.S. SENATE NE Disbursement for: X Primary ☐ General ☐ Other (specify) 2000	02/23/99	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ARMPAC (Americans for a Republican Majority PAC) 117 Second Street, NE Suite 2 Washington, DC 20002	1999 PAC to PAC contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify) 1999	02/23/99	2,389.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	3,389.00
TOTAL This Period (last page this line number only)	21,000.00

4-00173

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 3-18-99
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JM U
PREPARER

3-22-99
DATE PREPARED

(4/98)