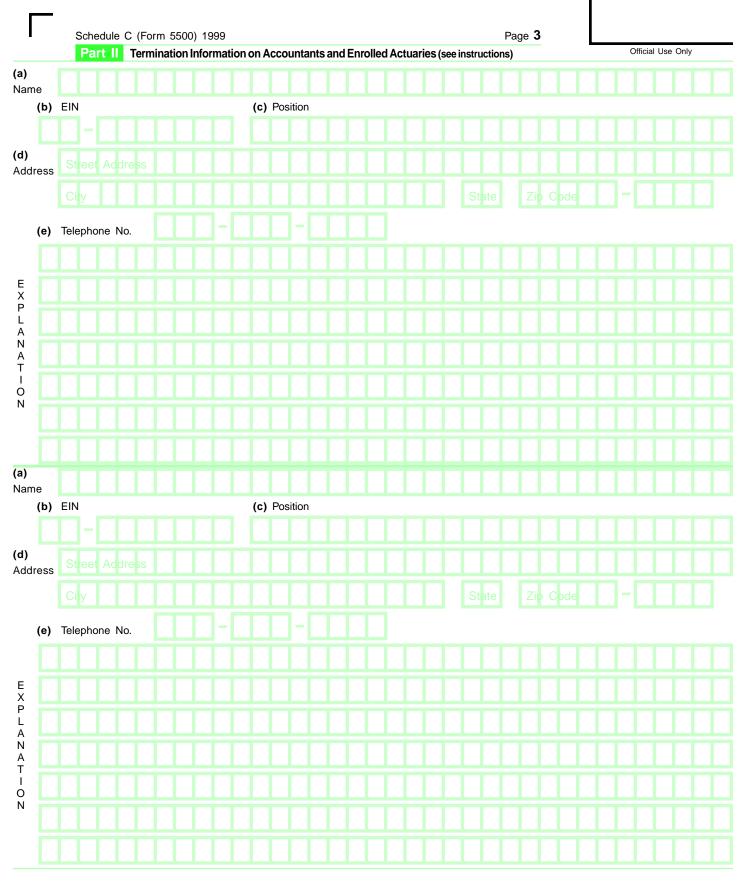
SCHEDULE C Service Provider Information												L	Official Use Only OMB No. 1210-0110												
	Department of the Treasury Internal Revenue Service This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974.										1999														
Welf	Department of Labor Pension and Welfare Benefits Administration Pension Benefit Guaranty Corporation										This Form is Open to Public Inspection.														
	calendar year 1999 I plan year beginning											, an	nd e	ndi	ng										
A Name of plan B Three-digi plan numb									•																
C Plan sponsor's name as shown on line 2a of Form 5500 D Employer									er I	Identification Number															
Part I	Service Provider I	nformati	ion (see i	inst	ruc	tio	ns)																	
	er the total dollar amount o er than those listed below,	•			•	•			•		ar:														_00
des	the first item below list the cending order of the compo- er N/A in columns (c) and	ensation th				-																•			
(a)	Name																								
(b)	Employer identification nu	mber (see	instru	uction	s)																				
(c)	Official plan position		С	ю	n	t	r	a	2	t	а	d	m	i	n	i	s	t	r	а	t	0	r		
(d)	Relationship to employer, employee organization, or known to be a party-in in																								
(e)	Gross salary or allowance		plan	(1	f) Fe	es	and	com	mis	ssions	paid	d by	plar	ו			(g)	Nat	ure	ofs	serv	ice	code	e(s)	
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For Pape	rwork Reduction Act Notice	and OMB	Cont	rol Nu	ımbe	rs. s	see	the ir	nstr	uctio	ns fo	r Fo	rm 5	500	. Ca	t. N	0.13	3515	FS	Sche	dule	C ((Forr	n 55	00) 199



	Schedule C (Form 5500) 1999 Page 2									
	Official Use Only									
(a)	Name									
(b)	Employer identification number (see instructions)									
(c)	Official plan position									
(d)	Relationship to employer, employee organization, or person known to be a party-in interest									
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(a)	Name									
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(e)	Gross salary or allowances paid by plan (f) Fees and commissions paid by plan (g) Nature of service code(s)									
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