



SCHEDULE A: CONFIRMATION OF OWNERSHIP

A. Name of Agent and authorized Intermediary

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B. Account

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C. Place & Date Incorporated

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D. Indicate the following for all Company Stockholders and Officers

Full Name	Title(s)	
Street Address		
City	State	Zip
Social Security Number	Citizenship	% of Stock Held

Full Name	Title(s)	
Street Address		
City	State	Zip
Social Security Number	Citizenship	% of Stock Held

Full Name	Title(s)	
Street Address		
City	State	Zip
Social Security Number	Citizenship	% of Stock Held





Full Name	Title(s)	
Street Address		
City	State	Zip
Social Security Number	Citizenship	% of Stock Held

Full Name	Title(s)	
Street Address		
City	State	Zip
Social Security Number	Citizenship	% of Stock Held
Full Name	Title(s)	
Street Address		
City	State	Zip
Social Security Number	Citizenship	% of Stock Held

