



Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
<b>HELTON SANDRA L,</b>	<b>X</b>			

## Signatures

**Joyce N. Hoffman**

**5/21/2003**

\*\* Signature of Reporting Person

Date

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.