COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
FINANCIAL REPORT
DECEMBER 31, 2010

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION

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Marvin and company, p.c.
CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

INDEPENDENT AUDITORS' REPORT

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Board of Trustees
Community Residence Insurance Savings Plan
Self-Insurance Trust for Workers' Compensation

We have audited the accompanying balance sheet of the Community Residence Insurance Savings Plan Self-Insurance Trust for Workers' Compensation (the "Trust") as of December 31, 2010, and the related statement of operations, changes in members' deficiency, and cash flows for the thirteen months then ended. These financial statements are the responsibility of the Trust's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with U.S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Trust's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Community Residence Insurance Savings Plan Self-Insurance Trust for Workers' Compensation as of December 31, 2010, and the results of its operations and its cash flows for the thirteen months then ended in conformity with U.S. generally accepted accounting principles.

As discussed in Note 12 to the financial statements, the Trust's Board of Trustees voted to cease providing workers' compensation coverage through the Trust effective December 31, 2010. Ongoing operations will consist of claims runoff.

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of expenses on page 15 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with U.S. generally accepted auditing standards. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Marvin and Company, P.C.

May 13, 2011

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
BALANCE SHEET
DECEMBER 31, 2010

ASSETS

Current Assets		
Cash and cash equivalents	$	1,049,184
Investments		6,636,235
Accrued interest receivable		33,359
Contributions receivable		1,041,922
Expected recoveries		1,324,684
Prepaid expenses		108,416
Deferred tax asset		5,858,000
TOTAL ASSETS	$	16,051,800

LIABILITIES AND MEMBERS' DEFICIENCY

Current Liabilities		
Liability for unpaid claims - reserves	$	18,232,203
Liability for incurred but not reported claims		9,034,377
ULAE reserve liability		1,270,000
Reserves - expected recoveries		(2,031,896)
Accounts payable and accrued expenses		141,296
Due to PMA Management Corp.		50,761
Liability for Workers' Compensation Board assessment		468,286
Total Current Liabilities		27,165,027
Members' Deficiency		
Unreserved		(11,594,288)
Accumulated other comprehensive income		481,061
Total Members' Deficiency		(11,113,227)
TOTAL LIABILITIES AND MEMBERS' DEFICIENCY	$	16,051,800

See accompanying notes to financial statements.

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
STATEMENT OF OPERATIONS
FOR THE THIRTEEN MONTHS ENDED DECEMBER 31, 2010

			Percent of Total Income
Contributions			
Contributions written	$	10,919,896	
Contribution adjustments		747,866	
Less commissions		(1,199,090)	
Net Contributions Written and Earned		10,468,672	
Other Income			
Investment income		314,662	
Realized gain on sale of investments		173,492	
Net Other Income		488,154	
TOTAL INCOME		10,956,826	100.0%
Operating Expenses			
Claims paid		10,102,406	92.2%
Claims reserve		10,315,000	94.1%
Loss adjustment expense		1,797,135	16.4%
Workers' compensation fund assessment		1,123,849	10.3%
Insurance expense		886,658	8.1%
General and administrative expense		483,997	4.4%
Interest expense		12,738	0.1%
Total Operating Expenses		24,721,783	225.6%
Income (Loss) from Operations Before Provision for Income Taxes		(13,764,957)	-125.6%
Provision for Income Taxes		3,500	0.0%
Deferred Tax Benefit		(4,661,000)	-42.5%
NET INCOME (LOSS)	$	(9,107,457)	-83.1%

See accompanying notes to financial statements.

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
STATEMENT OF CHANGES IN MEMBERS' DEFICIENCY
FOR THE THIRTEEN MONTHS ENDED DECEMBER 31, 2010

	Members' Deficiency	Accumulated Other Comprehensive Income	Total Members' Deficiency
Balance, November 30, 2009	$ (2,486,831)	$ 328,595	$ (2,158,236)
Comprehensive Loss:			
Net loss	(9,107,457)	-	(9,107,457)
Other comprehensive income:			
Unrealized gain on investments arising during the period	-	10,012	10,012
Reclassification adjustment	-	142,454	142,454
Comprehensive Loss	(9,107,457)	152,466	(8,954,991)
Balance, December 31, 2010	$ (11,594,288)	$ 481,061	$ (11,113,227)

See accompanying notes to financial statements.

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
STATEMENT OF CASH FLOWS
FOR THE THIRTEEN MONTHS ENDED DECEMBER 31, 2010

Cash Flows From Operating Activities		
Net loss	$	(9,107,457)
Adjustments to reconcile net income (loss) to net cash provided (used) by operating activities		
Amortization of premium on investments		21,760
Realized gain on sale of investments		(173,492)
Deferred taxes		(4,661,000)
(Increase) decrease in assets:		
Accrued interest receivable		3,774
Contributions receivable		460,658
Expected recoveries		(493,570)
Prepaid expenses		(82,918)
Increase (decrease) in liabilities:		
Liability for unpaid claims - reserves		12,510,837
Liability for incurred but not reported claims		(471,811)
ULAE reserve liability		1,270,000
Reserves - expected recoveries		(1,230,456)
Accounts payable and accrued expenses		88,720
Due to PMA Management Corp.		50,761
Liability for Workers' Compensation Board assessment		(541,978)
Net Cash Used by Operating Activities		(2,356,172)
Cash Flows From Investing Activities		
Purchase of investments		(4,485,703)
Proceeds from sales and maturities of investments		6,094,028
Net Cash Provided by Investing Activities		1,608,325
Net Decrease in Cash and Cash Equivalents		(747,847)
Cash and Cash Equivalents, Beginning of Period		1,797,031
Cash and Cash Equivalents, End of Period	$	1,049,184

Supplemental Disclosures:		
Interest paid	$	12,738
Income taxes paid	$	3,500

See accompanying notes to financial statements.

1. DESCRIPTION OF THE TRUST

Nature of Activities

The Community Residence Insurance Savings Plan Self-Insurance Trust for Workers' Compensation (the Trust or CRISP) was established October 31, 1995 and became operational on December 15, 1995. The Trust was established pursuant to the provisions of Subdivision 3-a of Section 50 of the Workers' Compensation Law. The Trust is governed by a Trust Agreement administered by a Board of Trustees, consisting of eight Trustees. As discussed below, the Trust ceased normal operations as of December 31, 2010. Prior to ceasing operations, the Trust received the majority of its revenue from member contributions. Membership in the Trust was open to employers engaged in providing community residence services or community mental hygiene treatment or rehabilitation services, special needs educational services programs and other social services programs, who were financially solvent; had an expected loss rate within set parameters; satisfied all other requirements of the Trust's excess carrier(s) and the Workers' Compensation Board of the State of New York and adhered to the safety policies and practices of the Trust. Voluntary termination of membership only occurred on the anniversary date of such membership. Upon termination of membership, such member remains liable for any and all dues and assessments relating to any period during which the member was a participant in the Trust.

In late October 2010, the Trustees, anticipating the continuation of competitive difficulties due to increased regulatory burden imposed on group self-insurance trusts, voted to close the CRISP Trust as of December 31, 2010. The Trust was moved into a run-off status overseen by the Workers' Compensation Board of the State of New York and the CRISP Trustees. In run-off, claims are being managed by PMA Management Corp. with oversight by the CRISP Trustees. Ultimate claim values will continue to be measured with the objective of maintaining sufficient assets managed by the Trustees to pay all claim obligations going forward, through collection of receivables and joint and several liability assessments to members as required by the By-Laws and the Workers' Compensation Board of the State of New York.

Purpose of the Trust

The Trust was established for the purpose of meeting and fulfilling an employer's obligations and liabilities under Article 2 of the Workers' Compensation Law which provides for workers' compensation coverage and benefits. The Trust was designed to minimize the cost of providing workers' compensation coverage by developing and refining specialized claim services and a loss prevention program for employers offering community services. A Program Administrator was contracted by the Trust.

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2010

1. DESCRIPTION OF THE TRUST

Plan Benefits

Workers' compensation benefits are provided by the Trust and administered under contract with the Trust's administrator. The Trust also maintains specific excess workers' compensation and employers' liability indemnity coverage with Safety National Casualty Corporation. Under the excess workers' compensation policy, the retained limit for workers' compensation coverage is $500,000 per occurrence. Under Employers' Liability $2,000,000 is the maximum limit of indemnity per occurrence. The Trust pays annual premiums for the insurance coverage. The excess workers' compensation and employers' liability indemnity coverage were not renewed at December 31, 2010, since there would be no new claims to cover. Fees for claims administration are based on the number of claims incurred and are included in claims adjustment expenses.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Contributions Earned

Contributions are billed to the members based on experience ratings and estimated covered payrolls of the participating members. Trust documents specify that contributions are fully earned at the start of each coverage period. Certain contribution adjustments have been recorded for the difference between estimated contributions and contributions calculated based on audited payroll of the members. Contribution adjustments are made prospectively upon completion of such audits for each member.

Liability for Reported and Incurred But Not Reported Claims

The Trust establishes claims liabilities (see Note 6) based on estimates of the ultimate cost of claims (including future claims adjustment expenses) that have been reported but not settled, and of claims that have been incurred but not reported. The length of time for which such costs must be estimated varies depending on the nature of the claim. Estimated amounts of reinsurance recoverable on unpaid claims are deducted from the liability for unpaid claims. Because actual claims costs depend on such complex factors as inflation, changes in doctrines of legal liability, and damage awards, the process used in computing claims liabilities does not necessarily result in an exact amount. Claims liabilities are recomputed periodically using a variety of actuarial and statistical techniques to produce current estimates that reflect recent settlements, claims frequency, and other economic and social factors and are reported at their estimated present value. A provision for inflation in the calculation of estimated future claims costs is implicit in the calculation because reliance is placed both on actual historical data that reflect past inflation and on other factors that are considered to be appropriate modifiers of past experience. Adjustments to claims liabilities are charged or credited to expense in the periods in which they are known.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Reinsurance

The Trust uses reinsurance agreements to reduce its exposure to large losses on insured events. Reinsurance permits recovery of a portion of losses from reinsurers, although it does not discharge the primary liability of the Trust and the members as direct insurer of the risks reinsured. To the extent that the reinsurance company should be unable to meet its obligations under the existing agreements, the Trust would be liable for such defaulted amounts. The Trust does not report reinsured risks as liabilities unless it is probable that those risks will not be covered by reinsurers.

Income Taxes

Deferred income tax assets and liabilities are computed annually for differences between the financial statement and tax basis of assets and liabilities that will result in taxable or deductible amounts in the future based on enacted tax law and rates applicable to the periods in which the differences are expected to affect taxable income. Valuation allowances are established when necessary to reduce deferred tax assets to the amount expected to be realized. Income tax expense is the tax payable or refundable for the period.

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates. The significant estimates included in these financial statements are the liability for unpaid claims and incurred but not reported claims.

Cash and Equivalents

For financial statement purposes, all highly liquid investments are considered cash equivalents. The Trust places its cash balances with high credit quality institutions.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Investments

Investments in securities traded on a national securities exchange are valued at their closing sale prices on the valuation date or in the absence of a reported sale, at the mean of the last recorded bid and asked prices within the last five bank business days preceding the valuation date. Nonlisted available-for-sale securities are valued utilizing an independent bond pricing service for identical assets or significantly similar securities. The pricing service uses a variety of techniques to arrive at fair value including market maker bids, quotes and pricing models. Inputs to the pricing models include recent trades, benchmark interest rates, spreads, two-sided markets, benchmark securities, offers, reference data, and industry and economic events. Unrealized gains and losses are recognized as a separate component of members' equity (deficiency). Realized gains and losses on investments are determined by specific identification and are charged or credited to current earnings.

Receivables

Receivables are reported at the amount that the Trust's management expects to collect from the members. This amount approximates the net realizable value. Trust management does not believe an allowance is necessary.

3. CASH AND EQUIVALENTS

Cash and cash equivalents consists of the following at December 31:

Money market funds	$ 1,049,184

During the period ended December 31, 2010 the Trust had cash balances in financial institutions, which exceeded the current FDIC limit.

4. INVESTMENTS

Current Workers' Compensation Board of the State of New York regulations restrict the cost of investments in equity securities held by self-insurance trusts to not more than 25% of total invested assets including cash and cash equivalents. Investments are classified as available-for-sale. Investments at December 31, 2010 consist of:

	Cost	Fair Value	Unrealized Gain (Loss)
Government securities	$ 4,208,630	$ 4,346,465	$ 137,835
Mutual funds	240,928	242,088	1,160
Equity securities	1,705,616	2,047,682	342,066
	$ 6,155,174	$ 6,636,235	$ 481,061

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2010

4. INVESTMENTS

The Trust invests in various investment securities and mutual funds. Investment securities and mutual funds are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities and mutual funds, it is at least reasonably possible that changes in the values of investment securities and mutual funds will occur in the near term and that such changes could materially affect the amounts reported in the balance sheet.

5. FAIR VALUE MEASUREMENTS

The Trust previously adopted the requirements of U.S. generally accepted accounting principles (GAAP) relating to the fair value measurement of its assets and liabilities. GAAP establishes a three-level hierarchy for disclosure of fair value measurements. The valuation hierarchy is based upon the transparency of inputs to the valuation of an asset or liability as of the measurement date. A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. The three levels are described as follows.

- Level 1 - Inputs to the valuation methodology are quoted prices (unadjusted) for identical assets or liabilities in active markets.
- Level 2 - Inputs to the valuation methodology include quoted prices for similar assets and liabilities in active markets and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the financial instrument.
- Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The following table presents the financial instruments recorded at fair value by the Trust for available-for-sale securities on a recurring basis.

		Fair Value Measurements at Reporting Date Using:		
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
December 31, 2010:				
Securities	$ 6,636,235	$ 6,636,235	$ -	$ -

6. LIABILITY FOR REPORTED AND INCURRED BUT NOT REPORTED CLAIMS

Liabilities for reported claims and incurred but not reported claims are estimated by the Trust with input from consulting actuaries. The Trust's policy is to establish reserves for losses for reported claims on a case basis and for incurred but not reported claims on a basis of historically established industry statistical data and the Trust's own historical experience. Trust management believes that it has recorded a liability for unpaid claims and claim adjustment expenses as of December 31, 2010 that is reasonable in the circumstances. However, because the Trust does not yet have sufficient historical loss experience to determine whether actual incurred claims and claim adjustment expenses will reasonably conform to the assumptions used in the determination of the estimated liability for unpaid claims and claim adjustment expenses, the ultimate amount of unpaid claims and claim adjustment expenses may vary significantly from the estimated amounts included in the accompanying financial statements. The Trust also takes into account the time value of money by reporting claims liabilities at their present value.

Liability for Workers' Compensation Board assessment includes amounts due to the Workers' Compensation Board of the State of New York and an estimate based on the liability for reported and incurred but not reported claims.

Consulting actuaries have provided an estimate of reported claims and incurred but not reported claims as of December 31, 2010 on both a discounted and non-discounted basis. The non-discounted estimate is $27,990,000 for the period ended December 31, 2010.

On a discounted basis, the estimate is $23,910,000 for the period ended December 31, 2010. Management believes these amounts fairly present the liability for estimated future claims based upon current assumptions and levels of activity. The liability for unpaid claims consists of the following at December 31:

Liability for known claims	$ 18,232,203
Liability for incurred but not reported claims	9,757,797
Total Liability for Unpaid Claims	$ 27,990,000
Discounted at 5% in 2010	$ 23,910,000

7. UNALLOCATED LOSS ADJUSTMENT EXPENSE RESERVE LIABILITY

The consulting actuaries also have provided an estimate for the unallocated loss adjustment expense (ULAE) reserve liability on both a discounted and non-discounted basis. The ULAE includes those adjustment expenses that cannot be directly associated with an individual claim. The liability as of December 31, 2010, on a non-discounted basis is $1,480,000 and on a discounted basis is $1,270,000. This liability has been added to the financial statements to adequately document this estimated ultimate cost given the closed status of the Trust.

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2010

8. INCOME TAXES

The provisions for federal income tax differ from the amount of income tax determined by applying the federal statutory rate to pre-tax income. The difference is primarily due to the net operating loss carryforward.

Provision for income tax consists of the following:

Current	
Federal	$ -
State	3,500
Total Current Taxes	$ 3,500

Differences between the provision for income tax expense at statutory income tax rates and the provision in the statement of operations follows:

Benefit at federal statutory rate	$ (4,661,000)

Beginning December 1, 2010, the Trust has available approximately $17,200,000 of net operating loss carryforwards which can be used to reduce future taxable income. The net operating loss carryforwards begin to expire in 2020.

Deferred Tax Assets

Financial accounting presentation requirements and tax basis regulations result in differences between the basis of certain assets and liabilities for financial reporting purposes and tax purposes. The tax effects of these differences, to the extent they are temporary, are recorded as deferred tax assets and liabilities and consist of the following at December 31, 2010:

Net operating losses	$ 5,858,000
Deferred tax asset	5,858,000
Less valuation allowance	-
Net deferred tax asset	$ 5,858,000

9. LETTER OF CREDIT

The Trust had an unused $2,300,000 irrevocable letter of credit with a bank which expired as of December 31, 2010.

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2010

10. TRUST ADMINISTRATOR AND CLAIMS ADJUSTER

Program Risk Management, Inc. is the Trust's administrator. PRM Claim Services, Inc. (an affiliate of the Trust's administrator) was the claims adjuster for the Trust until August 1, 2010, when claims administration was moved to PMA Management Corp.

11. COMMITMENTS AND CONTINGENCIES

The Trust has entered into a participation agreement with each member to provide risk management services, workers' compensation and employer's liability coverage. The agreement stipulates, among other things, that each member is jointly and severally liable for the workers' compensation and employer's liability obligations of the Trust and its members which were incurred during the member's period of membership in the Trust, irrespective of the subsequent termination of membership in the Trust, the insolvency or bankruptcy of another member of the Trust, or other facts or circumstances. Accordingly, the financial viability of the Trust is contingent, among other factors, upon the financial viability of the individual members.

12. CESSATION OF TRUST

In late October 2010, the Trustees, anticipating the continuation of competitive difficulties due to increased regulatory burden imposed on group self-insurance trusts, voted to close the CRISP Trust as of December 31, 2010. The Trust was moved into a run-off status overseen by the Workers' Compensation Board of the State of New York and the CRISP Trustees. In run-off, claims will be managed by PMA Management Corp. with oversight by the CRISP Trustees. Ultimate claim values will continue to be measured with the objective of maintaining sufficient assets managed by the Trustees to pay all claim obligations going forward, through collection of receivables and joint and several liability assessments to members as required by the By-Laws and the Workers' Compensation Board of the State of New York.

13. SUBSEQUENT EVENTS

Subsequent to the closure of the Trust on December 31, 2010, an assessment representing estimated ultimate claim costs and other expenses was calculated by the Trust. An assessment totaling $14,965,000 was billed to all former Trust participants in late March and early April 2011.

Trust management has evaluated all events subsequent to December 31, 2010 through May 13, 2011, which is the date these financial statements were available to be issued, and has determined that other than the matter discussed above there are no other subsequent events that require recording or disclosure.

COMMUNITY RESIDENCE INSURANCE SAVINGS PLAN
SELF-INSURANCE TRUST FOR WORKERS' COMPENSATION
SCHEDULE OF EXPENSES
FOR THE THIRTEEN MONTHS ENDED DECEMBER 31, 2010

			Percent of Income
Insurance Expense			
Trust reinsurance	$	775,225	7.1%
Surety bond insurance		37,430	0.3%
Directors and officers insurance		74,003	0.7%
Total Insurance	$	886,658	8.1%
General and Administration			
Actuarial services	$	20,000	0.2%
Legal		76,077	0.7%
Accounting and auditing		43,961	0.4%
Loss control service		65,000	0.6%
Workers' compensation audits		55,341	0.5%
Letter of credit expense		22,674	0.2%
Investment administration		60,524	0.6%
Office expense and other		968	0.0%
Trustee fees		131,250	1.2%
Trustee expense		8,202	0.1%
Total General and Administration	$	483,997	4.5%

Fw: ===SPAM=== CRISP Final Audited Financial Statements

Anthony Tropiano to: Michele Kiuber 05/20/2011 08:06 AM

C. Anthony Tropiano
Financial Analyst 2
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----- Forwarded by Anthony Tropiano/ALB/WCB on 05/20/2011 08:06 AM -----

From:	"Ed Sorenson" <esorenson@prm.com>
To:	<Anthony.Tropiano@wcb.state.ny.us>
Date:	05/19/2011 11:09 PM
Subject:	===SPAM=== CRISP Final Audited Financial Statements

Anthony,

Attached are finalized audited financials for CRISP. The Trustees reviewed and accepted them as rendered with no changes from the draft.

These are password protected (I can't figure out how to copy and get rid of the password--sorry). The password is CRISP_2010.

If you need a hard bound copy of either these statements or the actuarial report, please let me know and I will get them to you.

Thanks.

Ed

Edward A. Sorenson
Program Risk Management, Inc.
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Albany, NY 12205
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