

CURRENT

**REPORT OF CASES FOR WHICH ALL DAYS
WERE CLAIMED DURING A MONTH CREDITED PER
AN ADJUSTMENT REPORT PROCESSED FOR 1998**

EMPLOYER: 1321 Norfolk Southern RR

<u>SSN</u>	<u>EMPLOYEE NAME</u>	<u>BA4 ADJUSTMENT PROCESS DATE</u>	<u>MONTH(S) CREDITED</u>	<u>EMPLOYER REPLY</u>
		07-15-99	OCT	
		10-22-99	JAN	
		06-02-99	FEB JUN SEP OCT NOV	
		01-18-00	JAN	
		08-06-99	NOV	

EMPLOYER CERTIFICATION: THE INFORMATION IN THIS REPORT IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGNATURE

FORM ID-5S (SUP)(09-01)

OFFICIAL CONTACT: NAME

TELEPHONE NO. ()
