

Account Application, Client Agreement and Substitute Form W-9 Request for Taxpayer Identification Number

SALOMON SMITH BARNEY

A member of citigroup

Account Ownership / List all account owners:

CALL CENTER MANAGEMENT, INC.
 ATTN: RICHARD ALBERTINI

Account Number Branch 554 | Account 06326 | IC 1 | FC 8550

Account Address:
 Street Address / Line 1 3600 Wilshire Blvd #1700
 Street Address / Line 2
 City Los Angeles
 State and ZIP Code CALIF 90010

Date of Birth of Account Owner named first above: Month Year Citizenship U.S. U.S. Permanent Resident Alien: Country of citizenship is:

This account is for (check the appropriate box): Individual/Sole Proprietor Corporation Partnership Specify Other

Enter the Social Security Number of the Account Owner named first above OR the Employer Identification Number (if not an individual): Social Security No. OR Employer Identification No. 9514707913

Daytime Phone No. 310-912-0213 Evening Phone No. 800-217-3912 Fax No. (optional) 435-502-5899 E-Mail Address (required for online accounts) SSB@CAPITALC.VA.US.COM

Borrowing Privilege
 Portfolio CreditLine® allows you to borrow against the value of eligible securities in your account for almost any investment, personal or business purpose. Eligible accounts will have Portfolio CreditLine borrowing privileges unless you decline below. See accompanying literature for an explanation of Portfolio CreditLine borrowing.
 I/We do not want Portfolio CreditLine borrowing privileges in my/our account. Please note that you may not obtain an FMA Card (below) if you check this box.

Salomon Smith Barney Access®
 With Salomon Smith Barney Access® you can view account information, stock quotes, research and other information on the Internet. Enrollment is easy at www.salomonsmithbarney.com
 Speak to your Financial Consultant regarding our free SSB Access Internet Bill Pay service.
 Mother's Maiden Name is required to enroll online. TIDHAR

FMA Checking
 Checkwriting privileges provide you with convenient access to your money. All check information is reported on your monthly statement, including payee name and date written. Expense codes give you the option to categorize payments for tracking on your monthly and year-end statements.
 Please select your printing preference: Name and address Name only; no address One signature is required
 Please select your check style: Wallet size Executive (additional charge) Corporate (additional charge) Two signatures are always required

FMA Card
 The FMA Card is a Gold MasterCard® debit card that gives you easy access to cash at over 465,000 ATM machines and purchasing power at over 16 million locations. Enroll in our optional Travel & Rewards program and earn points towards exciting merchandise, restaurant and air travel rewards with every qualifying purchase. No annual card fee applies.
 How should the account owner's (primary cardmember's) information appear?
 Account Owner's Name should Appear as: Home Phone Number
 Social Security Number Mother's Maiden Name
 How should the account co-owner's information appear?
 Account Co-Owner's Name should Appear as: Home Phone Number
 Social Security Number Mother's Maiden Name

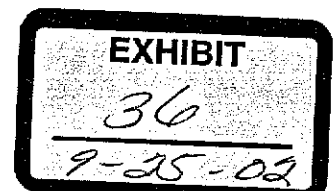
Travel & Rewards
 Yes, sign my FMA Card(s) up for the Travel & Rewards program so I can begin earning points with my first eligible purchases. A \$50 annual membership fee may apply.

Additional FMA Privileges
 The following services are also available when you establish your FMA account. Speak with your Financial Consultant for more details.
 Idle cash will be swept daily into your choice of:
 Bank Deposit Program - FDIC-insured deposits in affiliated Citigroup banks (Note: not available for managed accounts or business accounts.)
 Tax-free money market fund selection.
 Insured savings deposits through the IDA feature.
 Dividend Reinvestment. Reinvest dividends into additional shares without transaction fees. Speak to your Financial Consultant to select which dividends to reinvest.
 Direct Deposit. Your employer, pension plan or Social Security can send payments directly to your account. Contact the payer directly to enroll.

FDR 3026 (2/2001) / Page 1 of 4

SSB

135



Account Number	Branch	Account	T	IC	FC
554	06	326	1	8	550

FMA Automatic Funds Transfers

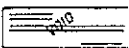
Transfer money by phone between your FMA and bank account. You may also transfer to another Salomon Smith Barney account that has been linked to your FMA account for statement reporting purposes.

Attach a voided check or a letter from your bank confirming the account number, title, account type (checking or savings) and the bank routing number (not required for transfers to Salomon Smith Barney accounts). Your bank account must have the name of at least one FMA account owner in the title. Speak to your Financial Consultant for trust and estate ownership requirements.

Financial Institution

Check if Credit Union

Account Number



Select your Telephone Authorization Code: (numbers only):

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Type of Account: Checking Savings

OPTIONAL - Complete only if you wish to establish monthly or biweekly recurring transfers

Check here for recurring transfers INTO your FMA account FROM your bank account.

Amount of Transfer

Monthly, on the day of each month (specify the 1st through 28th)

Check here for recurring transfers FROM your FMA account INTO your bank or Salomon Smith Barney account.

or Biweekly on Mon Tue Wed Thu Fri

Complete this section only if your bank account title includes someone who is not a co-owner of your FMA.

I authorize Salomon Smith Barney Inc. ("SSB") to initiate transfers and make adjustments for entries made in error to or from my account indicated above, in accordance with the terms of the FMA Agreement, which I have read and agree to. This authorization is to remain in full force and effect until SSB has received notification from me of its termination.

Account Title

Signature of non-FMA owner(s)

Date

Quicken® or Microsoft® Money

With a Salomon Smith Barney Financial Management Account, you may track your account transactions and activity with Quicken®, QuickBooks®, or Microsoft® Money software. Fees may apply. Please ask your Financial Consultant for an application.

FMA PLUS™

Establish my account as an FMA PLUS. I will benefit from: fee waivers on up to 100 ATM withdrawals per year with my FMA Card, no monthly fee for downloading data to Quicken or Microsoft Money, a complimentary IRA linked to my account, and premier statement reporting. Speak with your Financial Consultant for details on statement reporting and IRA services. Not available for BUSINESS FMA accounts.

Name Disclosure: The issuers of securities we held for you in street name may request your name, address and securities position. This information will not be released if you check this box:

Bank issued certificates of deposit purchased through Salomon Smith Barney, the Salomon Smith Barney Bank Deposit Program™ and the Salomon Smith Barney Insured Deposit Account sweep feature are insured by the FDIC (see disclosure documents for details). All other investment or insurance products sold through Salomon Smith Barney Inc.

- *are not insured by the FDIC;
- *are not a deposit or other obligation of a depository institution and are not guaranteed by a depository institution;
- *are subject to investment risks, including the possible loss of the principal amount invested.

In consideration of Salomon Smith Barney Inc. ("SSB") accepting an account for me/us, I/we ("I") acknowledge that I have read, understand and agree to the terms of the attached Client Agreement in sections 1 through 11. If this is a multiple party account, I/we further acknowledge that I/we have read, understand and agree to the terms of the attached Client Agreement contained in sections 12 through 14. If I have requested Salomon Smith Barney Access, I have read, understand, and agree to the terms of the Salomon Smith Barney Access Agreement. If I have requested any of the services referenced in the FMA sections above, I agree to the terms of the FMA Agreement that has been provided to me and understand that both an account minimum balance and annual fee apply. I authorize SSB to establish checking privileges, Online Services and the Automatic Funds Transfer service, and to have the FMA Card(s) issued as instructed on this Account Application, and I affirm that I have the authority to open this account. I authorize SSB and the FMA Card Issuer to have FMA Card(s) issued as indicated. I understand that this account is governed by the FMA Agreement, the Client Agreement, the Online Services Agreement, my agreement with the FMA Card issuer, the Bank Deposit Program Disclosure Documents, the IRA Disclosure Document, and/or other agreements I may have with SSB or other providers of services related to the FMA account. I have read all those documents and agree to their terms.

If this account is established with Portfolio CreditLine privileges, I further acknowledge that I have read, understand and agree to the terms of the attached Client Agreement contained in sections 15 through 17 and that my/our securities may be loaned to you or loaned out to others.

Tax Certification: Under penalties of perjury I certify that:

- 1.) the number I have provided above is my correct Taxpayer Identification Number (or I am waiting for a number to be issued to me), and
- 2.) I am not subject to backup withholding because: a.) I am exempt from backup withholding, or b.) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest and dividends, or c.) the IRS has notified me that I am no longer subject to backup withholding,
- 3.) I am a U.S. person (including a U.S. resident alien)

Certification Instructions: You must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Salomon Smith Barney Inc. requires your consent to the applicable provisions of this Agreement in order to open and maintain your account.

All account owners must sign.

If FMA Checking is requested, please sign as you will normally sign your checks.

Account Owner's Signature
Co-Owner's Signature

I acknowledge that I have received the Client Agreement which contains a pre-dispute arbitration clause in section 6.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Date

Date

For more information, visit www.ssb.com

FOR 3026 (2/2001) / Page 2 of 4

**Corporate Resolutions for
Corporate Account**

SALOMON SMITH BARNEY
A member of citigroup

Account Number			
Branch	Account	T IC FC	
554	06326	18	550

Name of Corporation	State of Incorporation
CALL CENTER MANAGEMENT	CA

The Corporation certifies that the Secretary of the Corporation named above (the "Corporation"), whose name appears beneath the Secretary's Certification (below), has been duly elected to and now holds that office and that the signature appearing opposite his or her name is his or her true signature.

Print Name of President/CEO	Signature of President/CEO	Dated
Daniel Nichele	X	

<p><i>Note: If the Secretary is empowered to act by the following resolutions, the President/CEO of the Corporation must execute this supplemental certification.</i></p>	I, being the President/CEO of the Corporation, do hereby certify that the Secretary, whose signature appears below, is empowered to act on behalf of the Corporation in accordance with the following resolutions.	Signature of President/CEO
		X

CERTIFICATION

I hereby certify that I am the Secretary of the Corporation named above, a corporation duly organized and existing under the laws of the State of incorporation, that the Corporation is in good standing and qualified to do business in this state. I further certify that the following is a true, correct and complete copy of resolutions duly adopted at a meeting of the Board of Directors of the Corporation held on the date specified below, at which meeting a quorum was present and voting; that such resolutions are in accordance with the charter and by-laws of the Corporation, are in full force and effect and have not been amended, modified or rescinded.

IN WITNESS WHEREOF, I have hereunto affixed my hand (and the seal of the Corporation) this _____ day of _____

Name of Secretary (Print)	Signature of Secretary	Date of Meeting of Board of Director
Daniel Nichele	X	

RESOLVED:

FIRST, that the individuals named in the spaces below ("Authorized Person") be and each of them hereby is, authorized and empowered to the fullest extent possible, to act on behalf of the Corporation, to establish and maintain a cash account, margin account, Business Financial Management AccountSM ("BUSINESS FMA"), commodities account or other account deemed necessary, proper or appropriate (each, a "Securities Account") with Salomon Smith Barney Inc., its subsidiaries, affiliates and successor firms ("SSB") for the purpose of purchasing, investing in, or otherwise acquiring, selling (including short selling), possessing, transferring, exchanging, borrowing, pledging or otherwise disposing of and generally dealing in and with cash and any and all forms of securities, including, but not limited to shares, stocks, bonds, debentures, notes, scrip, participation certificates, rights to subscribe, options, warrants, commodities, commodity futures and/or options on futures, certificates of deposit, mortgages, evidences of indebtedness, commercial paper, and interests of any and every kind and nature whatsoever, secured and unsecured, whether represented by trust, participating and/or other certificates or otherwise.

Print Name and Title, if Applicable	Signature
Daniel Nichele	
Print Name and Title, if Applicable	Signature

Print Name and Title, if Applicable	Signature
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Print Name and Title, if Applicable	Signature
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Print Name and Title, if Applicable	Signature
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Print Name and Title, if Applicable	Signature
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SECOND, that, on behalf of the Corporation, any Authorized Person shall have the fullest authority with respect to the Securities Account including, but not limited to authority to

- 1) give written or oral instructions to SSB with respect to any securities in, a transaction or service offered in connection with, the Securities Account,
- 2) deposit money, securities and other property of the Corporation in the Securities Account,
- 3) borrow money from SSB and secure payment thereof with the property of the Corporation,
- 4) bind the Corporation to any contract, arrangement or transaction, which shall be entered into by any Authorized Person with or through SSB,
- 5) make payments related to the Securities Account by checks and/or drafts drawn upon the funds of the Corporation,
- 6) deliver money or securities or accept delivery of money or securities,
- 7) endorse any securities in order to pass ownership thereof or for any other purpose,
- 8) direct the sale or exercise of any rights with respect to securities therein,
- 9) sign releases and powers of attorney and enter into contracts and agreements including, but not limited to an SSB Client Agreement, BUSINESS FMA Agreement, and documentation relating to any debit or credit card, checkwriting privilege, online services, electronic fund transfers and other services which are or may be offered in connection with the Securities Account as such documents may be modified from time to time, and any documentation permitted or contemplated by such agreements, products and services, and affix the corporate seal to same,