| Granite Capital, L.P.  | FORM D<br>FORM D<br>NOTICE OF SALE OF SECURITIES<br>PURSUANT TO REGULATION D,<br>SECTION 4(6), AND/OR<br>UNIFORM LIMITED OFFERING EXEMPTION<br>is an amendment and name has changed, and indicate changed   | 0000 8 6 3 6 3 3<br>PROCESSED   |
|--|---|---|
| Type of Filing: New Filing   | ly): 🗌 Rule 504 📋 Rule 505 🖾 Rule 506 🔲 Section   | m 4(6) ULOE MAR 2 7 2009  |
|  | A. BASIC IDENTIFICATION DATA  | THOMSON REUTERS   |
| 1. Enter the information requested ab  | notes to the  |   |
|  | a amendment and name has changed, and indicate change.)   |   |
| Address of Executive Offices (Number   |   | Telephone Number (Including Area Code)  |
|  | oor, New York, New York 10022<br>ons (Number and Street, City, State, Zip Code)   | (212) 407-3400<br>Telephone Number (Including Area Code)  |
| Brief Description of Business To   | operate as a private investment limited partnership.  |   |
| Type of Business Organization  | <ul> <li>☐ limited partnership, already formed</li> <li>☐ limited partnership, to be formed</li> </ul>  | er (please specify) 09036737  |
|  | Month Year  | 0000737   |
| Actual or Estimated Date of Incorpora  |   | Actual Estimated  |
| Jurisdiction of Incorporation or Organ   | ization (Enter two-letter U.S. Postal Service abbreviation for<br>CN for Canada; FN for other foreign jurisdiction)   | State:DE  |
| 239.500) only to issuers that file with<br>format on or after September 15, 2008 | This is a special Temporary Form D (17 CFR 239.500T) that<br>the Commission a notice on Temporary Form D (17 CFR 239<br>but before March 16, 2009. During that period, an issuer als<br>e issuer must file amendments using Form D (17 CFR 239.50                             | 9.500T) or an amendment to such a notice in paper<br>so may file in paper format an initial notice using Form   |
| 15 U.S.C. 77d(6).  | n offering of securities in reliance on an exemption under Re<br>no later than 15 days after the first sale of securities in the of   |   |
| Securities and Exchange Commission after the date on which it is due, on the     | (SEC) on the earlier of the date it is received by the SEC at the date it was mailed by United States registered or certified m   | he address given below or, if received at that address nail to that address.                                    |
| Copies Required: <u>Two (2) copies</u> of  | schange Commission, 100 F Street, N.E., Washington, D.C. 2<br>this notice must be filed with the SEC, one of which must be<br>igned copy or bear typed or printed signatures.   |   |
| Information Required: A new filing   | must contain all information requested. Amendments need o<br>sted in Part C, and any material changes from the information  |   |
| adopted ULOE and that have adopted sales are to be, or have been made. If        | fee.<br>licate reliance on the Uniform Limited Offering Exemption (U<br>this form. Issuers relying on ULOE must file a separate notic<br>a state requires the payment of a fee as a precondition to the c<br>e shall be filed in the appropriate states in accordance with st | ce with the Securities Administrator in each state where<br>claim for the exemption, a fee in the proper amount |
| Failure to file notice in the appropriate  | ATTENTION<br>states will not result in a loss of the federal exemption. Con<br>ailable state exemption unless such exemption is predicated o  |   |
| SRZ-9476539.2  | 1 of 8  | SEC 1972 (1/94)   |

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|   | A. BASIC IDEN   | TIFICATION DATA   |          |  |  |  |  |  |
|---|---|-------------------|----------|--|--|--|--|--|
| 2. Enter the information requested for  | the following:  |                   |          |  |  |  |  |  |
| o Each promoter of the issuer, if the issuer has been organized within the past five years;   |   |                   |          |  |  |  |  |  |
| • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; |   |                   |          |  |  |  |  |  |
| o Each executive officer and dir  | o Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and |                   |          |  |  |  |  |  |
| o Each general and managing pa  | artner of partnership issuers.  |                   |          |  |  |  |  |  |
| Check Box(es) that Apply: Promote   | r 📋 Beneficial Owner  | Executive Officer |          | General Partner                              |  |  |  |  |
| Full Name (Last name first, if individual)<br>Granite Capital, L.L.C.   |   |                   |          |  |  |  |  |  |
|   | nber and Street, City, State, Zi<br>w York, New York 10022  | p Code)           |          |  |  |  |  |  |
| Check Box(es) that Apply:   | r 🗌 Beneficial Owner  | Executive Officer | Director | Managing<br>Member of the<br>General Partner |  |  |  |  |
| Full Name (Last name first, if individual)<br>Eisenberg, Lewis M.   |   |                   |          |  |  |  |  |  |
|   | nber and Street, City, State, Zi<br>w York, New York 10022  | p Code)           |          |  |  |  |  |  |
| Check Box(es) that Apply:   | r 🗌 Beneficial Owner  | Executive Officer | Director | Managing<br>Member of the<br>General Partner |  |  |  |  |
| Full Name (Last name first, if individual)<br>Harrison, III, Walter F.,   |   |                   |          |  |  |  |  |  |
| Business or Residence Address (Nun<br>126 East 56 <sup>th</sup> Street, 25 <sup>th</sup> Floor, Ne  | nber and Street, City, State, Zi<br>w York, New York 10022  | p Code)           |          |  |  |  |  |  |
| Check Box(es) that Apply: Promote   | r 🔲 Beneficial Owner  | Executive Officer | Director | Managing<br>Member of the<br>General Partner |  |  |  |  |
| Full Name (Last name first, if individual)<br>Zuriff, Laurence  |   |                   |          |  |  |  |  |  |
| ,   | nber and Street, City, State, Zi<br>w York, New York 10022  | p Code)           |          |  |  |  |  |  |
| Check Box(es) that Apply:   | r 🔲 Beneficial Owner  | Executive Officer | Director | General and/or<br>Managing Partner           |  |  |  |  |
| Full Name (Last name first, if individual)  |   |                   |          |  |  |  |  |  |
| Business or Residence Address (Nun  | nber and Street, City, State, Zi  | p Code)           |          |  |  |  |  |  |
| Check Box(es) that Apply:   | r 🔲 Beneficial Owner  | Executive Officer | Director | General and/or<br>Managing Partner           |  |  |  |  |
| Full Name (Last name first, if individual)  |   |                   | · · · ·  |  |  |  |  |  |
| Business or Residence Address (Num  | nber and Street, City, State, Zi  | p Code)           |          |  |  |  |  |  |
| Check Box(es) that Apply:   | r 🔲 Beneficial Owner  | Executive Officer | Director | General and/or<br>Managing Partner           |  |  |  |  |
| Full Name (Last name first, if individual)  |   |                   |          |  |  |  |  |  |
| Business or Residence Address (Nun  | nber and Street, City, State, Zi  | p Code)           |          |  |  |  |  |  |

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|   | -   | · · ·         |               |              | Β.           | INFORMA                    | TION AB      | OUT OFFE     | RING         |              |              |              |                    |
|---|---|---------------|---------------|--------------|--------------|----------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------------|
| 1.  | Yes No 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE. |               |               |              |              |                            |              |              |              |              |              |              |                    |
| 2.  |   |               |               |              |              |                            |              |              |              |              |              |              |                    |
|   | *S  | ubject to th  | ne discretio  | n of the Ge  | meral Partr  | ner to accep               | t lesser am  | ounts.       |              |              | Ye           | s No         |                    |
| 3.  | Does th   | e offering    | permit join   | t ownershij  | o of a singl | e unit                     |              |              |              |              | _            |              |                    |
| 4.  | Enter th  | e informat    | ion request   | ed for each  | person wł    | 10 has been                | or will be   | paid or giv  | en, directly | or indirect  | ly, any con  |              |                    |
|   |   |               |               |              |              | ection with<br>and/or with |              |              |              |              |              |              | sociated person or |
|   |   |               |               |              |              | a broker or                |              |              |              |              |              |              |                    |
|   | Applica   |               |               |              |              |                            |              |              |              |              |              | <u>.</u>     |                    |
| Full Na   | me (Last  | name first    | , if individu | ual)         |              |                            |              |              |              |              |              |              |                    |
| Busines   | ss or Resi  | dence Add     | lress (Num    | ber and Str  | eet, City, S | tate, Zip C                | ode)         |              |              |              |              |              |                    |
| Name o  | of Associa  | ated Broke    | r or Dealer   |              |              |                            |              |              |              |              |              |              |                    |
|   |   |               |               |              |              | olicit Purch               | asers        |              |              |              |              |              |                    |
| ((  | Check "A  | II States" of | or check in   | dividual St  | ates)        |                            |              |              |              |              |              |              | States             |
|   | [AL]  | [AK]          | [AZ]          | [AR]         | [CA]         | [CO]                       | [CT]         | [DE]         | [DC]         | [FL]         | [GA]         | [HI]         | [ID]               |
|   | [IL]  | [IN]          | [IA]          | [KS]         | [KY]         | [LA]                       | [ME]         | [MD]         | [MA]         | [MI]         | [MN]         | [MS]         | [MO]               |
|   | [MT]<br>[RI]  | [NE]<br>[SC]  | [NV]<br>[SD]  | [NH]<br>[TN] | [NJ]<br>[TX] | [NM]<br>[UT]               | [NY]<br>[VT] | [NC]<br>[VA] | [ND]<br>[WA] | [OH]<br>[WV] | [OK]<br>[WI] | [OR]<br>[WY] | [PA]<br>[PR]       |
| Full Na   | me (Last  | name first    | , if individu | ual)         |              |                            | ·            |              |              |              |              |              |                    |
| Busines   | s or Resi   | dence Add     | lress (Num    | ber and Str  | eet, City, S | tate, Zip C                | ode)         |              |              |              |              |              |                    |
| Name o  | Name of Associated Broker or Dealer   |               |               |              |              |                            |              |              |              |              |              |              |                    |
|   |   |               |               |              |              | olicit Purch               | asers        |              |              |              |              | _            |                    |
| ((  | Check "A  | Il States" o  | or check in   | dividual St  | ates)        |                            |              |              |              |              |              |              | States             |
|   | [AL]  | [AK]          | [AZ]          | [AR]         | [CA]         | [CO]                       | [CT]         | [DE]         | [DC]         | [FL]         | [GA]         | [HI]         | [ID]               |
|   | [IL]  | [IN]          | [IA]          | [KS]         | [KY]         | [LA]                       | [ME]         | [MD]         | [MA]         | [MI]         | [MN]         | [MS]         | [MO]               |
|   | [MT]<br>[RI]  | [NE]<br>[SC]  | [NV]<br>[SD]  | [NH]<br>[TN] | [NJ]<br>[TX] | [NM]<br>[UT]               | [NY]<br>[VT] | [NC]<br>[VA] | [ND]<br>[WA] | [OH]<br>[WV] | [OK]<br>[WI] | [OR]<br>[WY] | [PA]<br>[PR]       |
| Full Na   | me (Last  | name first    | , if individu | ual)         |              |                            |              |              |              |              |              |              |                    |
| Business or Residence Address (Number and Street, City, State, Zip Code)  |   |               |               |              |              |                            |              |              |              |              |              |              |                    |
| Name o  | Name of Associated Broker or Dealer   |               |               |              |              |                            |              |              |              |              |              |              |                    |
| States in which Person Listed Has Solicited or Intends to Solicit Purchasers<br>(Check "All States" or check individual States) |   |               |               |              |              |                            |              |              |              |              |              |              |                    |
|   | [AL]  | [AK]          | [AZ]          | [AR]         | [CA]         | [CO]                       | [CT]         | [DE]         | [DC]         | [FL]         | [GA]         | [HI]         | [ID]               |
|   | IL]   | [IN]          | [72]          | [KS]         | [CA]<br>[KY] | [CO]<br>[LA]               | [CT]<br>[ME] | [DL]<br>[MD] | [DC]<br>[MA] | [N]          | [UA]<br>[MN] | [MS]         | [MO]               |
|   | [MT]  | [NE]          | [NV]          | [NH]         | [NJ]         | [NM]                       | [NY]         | [NC]         | [ND]         | [OH]         | [OK]         | [OR]         | [PA]               |
|   | [RI]  | [SC]          | [SD]          | [TN]         | [TX]         | [UT]                       | [VT]         | [VA]         | [WA]         | [WV]         | [WI]         | [WY]         | [PR]               |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

| Type of Security  | Aggregate<br>Offering<br>Price | Amount<br>Already<br>Sold |
|---|--------------------------------|---------------------------|
| Debt  |                                | \$0                       |
| Equity  |                                | \$0                       |
| [ ] Common[ ] Preferred   |                                |                           |
| Convertible Securities (including warrants)                       |                                | \$0                       |
| Partnership Interests   | \$1,000,000,000                | \$50,519,766              |
| Other (Specify Limited Partnership Interests)                     |                                | \$0                       |
| Total<br>Answer also in Appendix, Column 3, if filing under ULOE. | \$1,000,000,000                | \$50,519,766              |

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

|  | Number<br>Investors | Aggregate Dollar<br>Amount of<br>Purchases |
|--|---------------------|--|
| Accredited Investors   | 32                  | \$50,519,766                               |
| Non-accredited Investors   | 0                   | \$0  |
| Total (for filing under Rule 504 only)<br>Answer also in Appendix, Column 4, if filing under ULOE. |                     | \$   |

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

| Type of Offering | Type of<br>Security | Dollar<br>Amount Sold |
|------------------|---------------------|-----------------------|
| Rule 505         |                     | \$                    |
| Regulation A     |                     | \$                    |
| Rule 504         | <u> </u>            | \$                    |
| Total            |                     | \$                    |

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

| Transfer Agent's Fees                                | [ ] <u>\$0</u>        |
|--|-----------------------|
| Printing and Engraving Costs                         | [ x ] <u></u> \$*     |
| Legal Fees   | [ x ] <u></u> \$*     |
| Accounting Fees                                      | [ x ] <u></u> \$*     |
| Engineering Fees                                     | [ ] <u>\$0</u>        |
| Sales Commissions (specify finders' fees separately) | [ ] <u>\$0</u>        |
| Other Expenses (identify)                            | [ x ] <u>\$*</u>      |
| Total  | [ x ] <u>\$50,750</u> |
|  |                       |

\*All offering and organizational expenses are estimated not to exceed \$50,750.

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$999,949,250

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

|  |   |   | Payments to<br>Officers,<br>Directors, &<br>Affiliates |                |       | Payments to<br>Others |
|--|---|---|--|----------------|-------|-----------------------|
| Salaries and fees  | [ | ] | \$   | [              | ]     | \$                    |
| Purchase of real estate  | [ | ] | \$   | [              | ]     | \$                    |
| Purchase, rental or leasing and installation of machinery and equipment  | [ | ] | \$   | [              | ]     | \$                    |
| Construction or leasing of plant buildings and facilities  | [ | ] | \$   | [              | ]     | \$                    |
| Acquisition of other businesses (including the value of securities<br>involved in this offering that may be used in exchange for the assets or<br>securities of another issuer pursuant to a merger) | [ | ] | <u>\$</u>  | [              | ]     | \$                    |
| Repayment of indebtedness  | [ | ] | \$   | l              | ]     | \$                    |
| Working capital  | [ | ] | \$   | [              | ]     | \$                    |
| Other (specify): Investment capital  | [ | ] | \$   | [              | ( ]   | \$999,949,250         |
| Column Totals  | [ | ] | \$   | [ )            | ( )   | \$999,949,250         |
| Total Payments Listed (column totals added)  |   |   | [X] S  | <b>6999</b> ,9 | 949,2 | 50                    |

## D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

| Issuer (Print or Type)<br>Granite Capital, L.P. | Signature Date 3) 10 / 0 /             |
|---|--|
| Name of Signer (Print or Type)                  | Title of Signer (Print or Type)        |
| Walter F. Harrison, III                         | Managing Member of the General Partner |

| ATTENTION   |  |
|---|--|
| Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.) |  |

|    |                                | E. STATE SIGNATURE   |         |        |
|----|--------------------------------|--|---------|--------|
|    |                                |  |         | Yes No |
| 1. | Is any party described in 17 ( | CFR 230.262 presently subject to any of the disqualification provisions of suc | h rule? |        |

See Appendix, Column 5, for state response. Not applicable

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. Not applicable
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not applicable
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. Not applicable

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type)  | Signature Date                         |
|-------------------------|--|
| Granite Capital, L.P.   | 3110/09                                |
| Name (Print or Type)    | Title (Print or Type)                  |
| L. L.                   |  |
| Walter F. Harrison, III | Managing Member of the General Partner |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| APPENDIX |   |          |   |  |               |  |          |  |     |  |
|----------|---|----------|---|--|---------------|--|----------|--|-----|--|
| ·        | 1   |          |   | Granite C  | Capital, L.P. | ·  |          | 1  |     |  |
| 1        | 2<br>Intend to sell to<br>non-accredited<br>investors in State<br>(Part B-Item 1) |          | 3<br>Type of security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) | 4<br>Type of investor and amount purchased in State<br>(Part C-Item 2) |               |  |          | 5<br>Not Applicable<br>Disqualification<br>under State ULOE<br>(if yes, attach<br>explanation of<br>waiver granted)<br>(Part E-Item 1) |     |  |
| State    | Yes   | No       | Limited<br>Partnership<br>Interests<br>\$1,000,000,000  | Number of<br>Accredited<br>Investors                                   | Amount        | Number of<br>Non-<br>Accredited<br>Investors | Amount   | Yes  | No  |  |
| AL       |   |          |   |  |               |  |          |  |     |  |
| AK       |   |          |   |  |               |  |          |  |     |  |
| AZ       |   |          |   |  |               |  |          |  |     |  |
| AR       |   |          |   |  |               |  |          |  |     |  |
| CA       |   | X        | x   | 1  | \$1,616,193   | 0  | 0        |  |     |  |
| СО       |   |          |   |  |               |  |          |  |     |  |
| СТ       |   | x        | x   | 7  | \$10,601,545  | 0  | 0        |  |     |  |
| DE       |   |          |   |  |               |  |          |  |     |  |
| DC       |   |          |   |  |               |  |          |  |     |  |
| FL       |   | X        | х   | 2  | \$5,089,123   | 0  | 0        | ļ  |     |  |
| GA       |   |          |   |  |               |  |          |  |     |  |
| HI       |   |          |   |  |               |  |          |  |     |  |
| ID       |   |          |   |  |               |  |          | _  |     |  |
| IL       |   |          |   |  |               |  |          |  |     |  |
| IN       |   |          |   |  |               |  |          |  |     |  |
| IA       |   |          |   |  |               |  |          |  |     |  |
| KS<br>KY |   |          |   |  |               |  |          |  |     |  |
| LA       |   |          |   |  |               |  |          |  |     |  |
| ME       |   |          |   |  |               |  |          |  |     |  |
| MD ME    |   | <u> </u> |   |  |               |  |          |  |     |  |
| MA       |   |          | <br>  |  |               |  |          |  |     |  |
| MI       |   |          |   |  |               |  | <u></u>  | +  | -   |  |
| MN       |   |          |   |  |               |  |          |  |     |  |
| MS       |   |          |   |  |               |  |          |  |     |  |
| MO       |   |          |   |  |               |  |          | + • •  |     |  |
| MT       |   |          |   |  |               |  |          | 1  |     |  |
| NE       |   |          |   |  |               |  | <u>_</u> |  | ··· |  |

|       |   |    | · ·· ··   | APP  | ENDIX         |  |          |  |    |
|-------|---|----|---|--|---------------|--|----------|--|----|
|       |   |    | · · · · · ·   | Granite C  | Capital, L.P. |  |          |  |    |
| 1     | 1 2<br>Intend to sell<br>non-accredit<br>investors in S<br>(Part B-Item |    | 3<br>Type of security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) | 4<br>Type of investor and amount purchased in State<br>(Part C-Item 2) |               |  |          | 5<br>Not Applicable<br>Disqualification<br>under State ULOE<br>(if yes, attach<br>explanation of<br>waiver granted)<br>(Part E-Item 1) |    |
| State | Yes   | No | Limited<br>Partnership<br>Interests<br>\$1,000,000,000  | Number of<br>Accredited<br>Investors                                   | Amount        | Number of<br>Non-<br>Accredited<br>Investors | Amount   | Yes  | No |
| NV    |   |    |   |  |               |  |          |  |    |
| NH    |   | X  | x   | 1  | \$1,000,000   | 0  | 0        |  |    |
| NJ    |   | X  | x   | 4  | \$10,037,754  | 0  | 0        |  |    |
| NM    |   |    |   |  |               |  |          |  |    |
| NY    |   | x  | x   | 14   | \$19,325,305  | 0  | 0        |  |    |
| NC    |   |    |   |  |               |  |          |  |    |
| ND    |   |    |   |  |               |  |          |  | 1  |
| OH    |   |    |   |  |               |  |          |  |    |
| OK    |   |    |   |  |               |  |          |  |    |
| OR    |   |    |   |  |               |  |          |  |    |
| PA    |   | x  | x   | 2  | \$2,599,846   | 0  | 0        |  |    |
| RI    |   |    |   |  |               |  |          |  |    |
| SC    |   |    |   |  |               |  |          |  |    |
| SD    |   |    |   |  |               |  |          |  |    |
| TN    |   | x  | х   | 1  | \$250,00      | 0  | 0        |  |    |
| ТХ    |   |    |   |  |               |  |          |  |    |
| UT    |   |    |   |  |               |  | <u> </u> |  |    |
| VT    | +   |    |   |  |               |  | · -      | 1  |    |
| VA    |   |    |   |  |               |  |          |  |    |
| WA    | 1   |    |   |  | <u> </u>      |  |          |  |    |
| wv    |   |    |   |  |               |  |          |  |    |
| WI    |   |    |   |  |               |  |          |  |    |
| WY    |   |    |   |  |               |  |          |  |    |
| PR    |   |    |   |  |               |  |          |  |    |

