

**2715.6403 FORM B: CHANGES IN OWNERSHIP.**

STATEMENT OF CHANGES IN  
BENEFICIAL OWNERSHIP OF EQUITY SECURITIES

(Filed with Respect to Domestic Stock Insurer  
Pursuant to Minnesota Statutes, Section 60A.22)

Name of Insurer:

Address:

Name of Person Whose  
Ownership is Reported:

Address:

Relationship of Such  
Person to Insurer (See Part  
2715.6404, Subpart 4):

Statement for Calendar Month of \_\_\_\_\_, 197\_.

CHANGES DURING MONTH, AND MONTH-END OWNERSHIP

(See Part 2715.6404, Subpart 5)

Title of Security (See Part 2715.6404, Subpart 6)	Date of Transaction (See Part 2715.6404, Subpart 7)	Amount Bought or Otherwise Acquired	Amount Sold or Otherwise Disposed of	Amount Owned at End of Month	Nature of Ownership (See Part 2715.6404, Subpart 9)
		(See Part 2715.6404, Subpart 8)			

Remarks (See Part 2715.6404, Subparts 10 and 11):

Date of Statement:

Where Made:

I affirm under penalty of perjury that the foregoing is full, true, and correct.

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(Signature)

**Statutory Authority:** *MS s 60A.22*

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