Edgar Filing: DUPRATT GREG - Form 4

DUPRATT GREG Form 4 April 03, 2003

FORM 4

_ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response. . .0.5

Filed By

Romeo and Dye's

Section 16 Filer www.section16.net

OMB APPROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

					suer Nam t Northei				6. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
DuPratt, Gregory (Last) (First) (Middle) 195 N. First Street P.O. Box 547										ent for ty/Year	r	X Director 10% Owner Officer (give title below) Other (specify below)		
Dixon, CA 99	(Street) 5620								5. If Amer Date of O (Month/D	riginal	ar)	7. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(Ci	ity) (State)	(Zip)			Table l	[N	on-Deri	ivative	Securities	a Acqu	ired, Dispo	sed of, or Beneficially Owned		
1. Title of Security (Instr. 3)	2. Trans- action Date (Month/ Day/ Year)	2A. Deemed Execution Date, if any (Month/Day/	Trans- action Code (Instr.	n Disposed of (D) (Instr. 3, 4 & 5) . 8)				5. Amount of Securities Beneficially Owned Follow- ing Reported			Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
	(ical)	Year)	Code	V	Amount	(A) or (D)	Price		ctions(s) 3 & 4)		(Instr. 4)			
Common Capital	03/31/03		J ⁽¹⁾		220	A	\$24.50			3902	D			
Common Capital	03/31/03		J ⁽¹⁾		199	А	\$24.50			3527	Ι	IRA for Spouse-Street Name w/Charles Schwab		
Common Capital	03/31/03		J <u>(1)</u>		48	Α	\$24.50			855	D	IRA in Street Name w/Charles Schwab - Individual		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. * If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

FORM 4 (continued) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned													
(e.g., puts, calls, warrants, options, convertible securities)													
1. Title of	2. Conver-	3.	3A.	4.	5.	6. Date Exercisable	7. Title and	8. Price of	9. Number of	10.	11. Nature		
Derivative	sion or	Trans-	Deemed	Trans-	Number	and Expiration	Amount of	Derivative	Derivative	Owner-	of Indirect		

Edgar Filing: DUPRATT GREG - Form 4

Security	Exercise	action	Execution	action	of		Date		Unde	rlying	Security	Securities	ship	Beneficial
	Price of	Date	Date,	Code	De	riva	ti (Malonth/Day/		Secu	rities	(Instr. 5)	Beneficially	Form	Ownership
(Instr. 3)	Derivative		if any		Se	curit	i e% ear)		(Instr	: 3 & 4)		Owned	of Deriv-	(Instr. 4)
	Security	(Month/	(Month/	(Instr.	A	quir	ed					Following	ative	
		Day/	Day/	8)	(A) or						Reported	Security:	
		Year)	Year)		Di	spos	ed					Transaction(s)	Direct	
					of	(D)						(Instr. 4)	(D)	
												`	or	
					(Iı	str.							Indirect	
					3,	4 &							(I)	
					5)								(Instr. 4)	
				Code	V (A) (D) Date	Expira-	Title	Amount				
							Exer-cisable	tion		or				
								Date		Number				
										of				
										Shares				

Explanation of Responses:

(1) ALL ACCOUNTS PAID A 6% Stock Dividend for 2003 on 3/31/03

By: /s/ Lynn Campbell AVP/Corporate Secretary w/POA **Signature of Reporting Person

<u>04/02/03</u>

Date

**Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed.

If space is insufficient, See Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.