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Rodeheaver Carissa Lynn Form 3 December 28, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Rodeheaver Carissa Lynn (Last) (First) (Middle)	2. Date of Event Requiring Statement (Month/Day/Year) 12/21/2005		TED CORI	P/MD/ [FUNC]		
19 SOUTH SECOND STREET, P.O. BOX 9		(Check	all applicable)			
(Street) OAKLAND, MD 215500009		Director _X Officer (give title below Chief Fi	Other	ow) _X_ Form filed by One Reporting		
(City) (State) (Zip)	Table I - N	Non-Derivative Securities Beneficially Owned				
1.Title of Security (Instr. 4)	2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock	223.12		D	Â		
Common Stock	790.24		I	By 401(k)		
Common Stock	13.97		I	By Spouse as UTMA custodian for son		
Reminder: Report on a separate line for e owned directly or indirectly.		ially SI	EC 1473 (7-02)		
information cont required to respo	pond to the collection of ained in this form are not and unless the form displa					

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

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1. Title of Derivative Security (Instr. 4)

Expiration Date (Month/Day/Year)

2. Date Exercisable and 3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

Conversion or Exercise Price of Derivative Security

5. Ownership Form of Derivative Security:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date Exercisable

Expiration Title Date

Amount or Number of Shares

Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships				
. 0	Director	10% Owner	Officer	Other	
Rodeheaver Carissa Lynn 19 SOUTH SECOND STREET P.O. BOX 9 OAKLAND, MD 215500009	Â	Â	Chief Financial Officer	Â	

Signatures

By: /s/ Carissa L. Rodeheaver

12/23/2005

**Signature of Reporting Person

Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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