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FORM 4	U.S.	SECURIT	IES AN	D EXC	CHANC	GE CO	OMMI	MB Approva SSION			
[] Check this box if no l subject to Section 16. 4 or Form 5 obligation continue. See Instruct	Form ns may		VASHII TEMEN				E N BEN	xpires: Septe EFICIAL O' ours per resp	mber 3 WNER	SHIP	
Filed pursuant to S Holding ((Print or Type Response	Company							Section 17(a) ent Company			
1. Name and Address of											porting Person(s) to
Reginald B. Newman II		Rand (Capital (Iss	uer RAND		I	(Chec	k all ar	oplicable)	
Clast) (First) (Middle) 3. IRS or Social 4. Statement for Officer (give title below) Security Number Month/Year Other (specify below) of Reporting October 1998 2440 Sheridan Drive Person (Voluntary)											
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	 	Da (M	te of Or Ionth/Y	iginal ar)	(Ch X Fo	eck A	Applica	ble Line) One Reporti	ng Pers	son	
Tonawanda NY	1413			Pe	rson						
(City) (State)	(Zip) TABI	LE I - NO	N DERI	VATIV	/E SEC	CURI	TIES A	.CQUIRED,	DISPO	SED OF, OR	BENEFICIALLY OWNED
	(Month/l Year) 	Day/ (I Code V	(Instr. 8) Amour (I	(Ins	tr. 3, 4,	and wned on the control of the contr	5) Bo d at End of Mont (nstr. 3 4) ((Instr.4	ecurities sheneficially Feneficially Fen	orm: ene- ficial wner-	Indirect	
Common Stock		10/13/98	 P		1	1	1	661,250	 D		
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Reminder: Report on a s	eparate lii	ne for each	class o	f secur	ities be	nefic	ially ov	vned, directly	or ind	lirectly.	(over)

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| <\$> FORM 4 (CONTINUED (e) | | | | | | | | UIRED, DIS ÆRTIBLE S | | | NEFICIALLY OWNED |
1.Title of Derivative Security | 2.Conversion | 3.Transaction | 4.Transaction | 5.Number of | 6.Date Exer- | 7.Title and Amount

(Instr. 3)	Price of	Date	3) Securit	ies Ex	piration Dat	and of Unterpreted of Unite Securities (Day/Year) (, ,			
	Security	Year) c c	or Disport (D)	oosed 	 	Amount or e Number of Shares				
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	nth Indirect 4) (Instr. 4) 									
		· 								
xplanation of R	esponses:	·								
					10/14/98	14/98				
		*Sig	*Signature of Reporting Person Date							
			aniel P. Penleginald B. N							

** 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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