MONTH January YEAR 1999

PRIMARY EVENT COUNTY: <u>Cook</u>

COMPANY NAME:	Bodine Electric Company	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	2500 West Bradley Place	WARN NOTIFIED DATE:	01/20/99
		FIRST LAYOFF DATE:	03/31/99
CITY, STATE, ZIP:	Chicago, IL 60618	# WORKERS AFFECTED:	102
COMPANY CONTACT:	John Bodine	EVENT CAUSES:	Consolidation
TELEPHONE:	773/478-3515	_	Relocation
SUBSTATE AREA & NUMBER:	S09	_	
TYPE OF COMPANY:	Manufacturing/Comm. Machinery and Computer Equipment	COMPANY SIC:	3566
COMPANY NAME:	Continental Grain Company	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	222 South Riverside Plaza	WARN NOTIFIED DATE:	01/11/99
		FIRST LAYOFF DATE:	03/18/99
CITY, STATE, ZIP:	Chicago, IL 60606	# WORKERS AFFECTED:	138
COMPANY CONTACT:	Jim Aikins	EVENT CAUSES:	Company being
TELEPHONE:	312/207-5164	_	sold.
SUBSTATE AREA & NUMBER:	S09	_	
TYPE OF COMPANY:	Wholesale Trade/Non-Durable Goods	COMPANY SIC:	5153
COMPANY NAME:	Dacor Corporation	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	151 Northfield Road	WARN NOTIFIED DATE:	01/08/99
		FIRST LAYOFF DATE:	03/05/99
CITY, STATE, ZIP:	Northfield, IL 60093	# WORKERS AFFECTED:	63
COMPANY CONTACT:	Carlo Bertozzi	EVENT CAUSES:	Relocation
TELEPHONE:	847/446-9555	_	
SUBSTATE AREA & NUMBER:	S08	_	
TYPE OF COMPANY:	Misc. Manufacturing Industries	COMPANY SIC:	3949

Cook County Page Two

COMPANY NAME:	Favorite Brands International, Inc.	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	4820 Searl Parkway	WARN NOTIFIED DATE:	01/12/99
		FIRST LAYOFF DATE:	03/09/99
CITY, STATE, ZIP:	Skokie, IL 60077	# WORKERS AFFECTED:	124
COMPANY CONTACT:	Jarold A. Koepsel	EVENT CAUSES:	Not provided.
TELEPHONE:	847/405-5712		
SUBSTATE AREA & NUMBER:	S08		
TYPE OF COMPANY:	Food & Kindred Products	COMPANY SIC:	2064
COMPANY NAME:	Montgomery Ward & Company	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	500 Lincoln Mall	WARN NOTIFIED DATE:	01/20/99
		FIRST LAYOFF DATE:	03/21/99
CITY, STATE, ZIP:	Matteson, IL 60443	# WORKERS AFFECTED:	135
COMPANY CONTACT:	Howard Kraus	EVENT CAUSES:	Bankruptcy
TELEPHONE:	312/467-3683		
SUBSTATE AREA & NUMBER:	S07		
TYPE OF COMPANY:	General Merchandise Stores	COMPANY SIC:	5311
COMPANY NAME:	Montgomery Ward & Company		Closing
COMPANY ADDRESS:	5601 West Touhy		01/20/99
	Village Crossing Shopping Center	FIRST LAYOFF DATE:	03/21/99
CITY, STATE, ZIP:	Niles, IL 60714	# WORKERS AFFECTED:	148
COMPANY CONTACT:	Howard Kraus	EVENT CAUSES:	Bankruptcy
TELEPHONE:	312/467-3683		
SUBSTATE AREA & NUMBER:	S08		
TYPE OF COMPANY:	General Merchandise Stores	COMPANY SIC:	5311

Cook County Page Three

COMPANY NAME:	Motion Industries, Inc.	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	Berry Division	WARN NOTIFIED DATE:	01/19/99
	4242 South First Avenue	FIRST LAYOFF DATE:	01/29/99
CITY, STATE, ZIP:	Lyons, IL 60534	# WORKERS AFFECTED:	88
COMPANY CONTACT:	Donald R. Wells	EVENT CAUSES:	Not provided.
TELEPHONE:	708/442-1200		
SUBSTATE AREA & NUMBER:	S07		
TYPE OF COMPANY:	Wholesale Trade/Durable Goods	COMPANY SIC:	5084
		_	
COMPANY NAME:	American General Life Companies	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	8501 West Higgins Road	WARN NOTIFIED DATE:	01/26/99
		FIRST LAYOFF DATE:	03/31/99
CITY, STATE, ZIP:	Chicago, IL 60631	# WORKERS AFFECTED:	59
COMPANY CONTACT:	Brian Murphy	EVENT CAUSES:	Consolidation
TELEPHONE:	713/831-8479		Relocation
SUBSTATE AREA & NUMBER:	S09		
TYPE OF COMPANY:	Insurance Carriers	COMPANY SIC:	6311
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:		_	
SUBSTATE AREA & NUMBER:		_	
TYPE OF COMPANY:		COMPANY SIC:	

MONTH January YEAR 1999

PRIMARY EVENT COUNTY: <u>Iroquois</u>

COMPANY NAME:	Standard Register Company	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	Customer Service Center	WARN NOTIFIED DATE:	01/19/99
	255 West Fleming Street	FIRST LAYOFF DATE:	03/16/99
CITY, STATE, ZIP:	Watseka, IL 60970	# WORKERS AFFECTED:	110
COMPANY CONTACT:	Tammy Johnson	EVENT CAUSES:	Realignment of
TELEPHONE:	937/443-3216		facilities.
SUBSTATE AREA & NUMBER:	S17		
TYPE OF COMPANY:	Wholesale Trade/Non-Durable Goods	COMPANY SIC:	5112
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	

MONTH January YEAR 1999

PRIMARY EVENT COUNTY: <u>Knox</u>

COMPANY NAME:	Gates Rubber Company	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	Coupled Assembly Department	WARN NOTIFIED DATE:	01/06/99
	630 US Highway 150 East	FIRST LAYOFF DATE:	03/12/99
CITY, STATE, ZIP:	Galesburg, IL 61401	# WORKERS AFFECTED:	57
COMPANY CONTACT:	Glenn Burg	EVENT CAUSES:	Not provided.
TELEPHONE:	309/343-7171		
SUBSTATE AREA & NUMBER:	S14		
TYPE OF COMPANY:	Rubber & Misc. Plastic Products	COMPANY SIC:	3052
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	

MONTH January YEAR 1999

PRIMARY EVENT COUNTY: <u>McClain</u>

COMPANY NAME:	Mitsubishi Motor Manufacturing	TYPE OF EVENT:	Mass Layoff
COMPANY ADDRESS:	100 North Mitsubishi Motorway	WARN NOTIFIED DATE:	01/27/99
		FIRST LAYOFF DATE:	03/22/99
CITY, STATE, ZIP:	Normal, IL 61761	# WORKERS AFFECTED:	700
COMPANY CONTACT:	Karen Mueller	EVENT CAUSES:	Not provided.
TELEPHONE:	309/888-8000		
SUBSTATE AREA & NUMBER:	S16		
TYPE OF COMPANY:	Transportation Equipment	COMPANY SIC:	3711
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	

MONTH January YEAR 1999

PRIMARY EVENT COUNTY: <u>St. Clair</u>

COMPANY NAME:	Continental Grain Company	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	430 South Front Street	WARN NOTIFIED DATE:	01/08/99
		FIRST LAYOFF DATE:	03/18/99
CITY, STATE, ZIP:	East St. Louis, IL 62201	# WORKERS AFFECTED:	57
COMPANY CONTACT:	Jim Aikins	EVENT CAUSES:	Takeover
TELEPHONE:	312/207-5164	_	
SUBSTATE AREA & NUMBER:	S24	_	
TYPE OF COMPANY:	Wholesale Trade/Non-Durable Goods	COMPANY SIC:	5153
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:		_	
SUBSTATE AREA & NUMBER:		_	
TYPE OF COMPANY:		COMPANY SIC:	
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:		_	
SUBSTATE AREA & NUMBER:		_	
TYPE OF COMPANY:		COMPANY SIC:	

MONTH January YEAR 1999

PRIMARY EVENT COUNTY: <u>Stephenson</u>

COMPANY NAME:	Kelly Springfield Tire Company	TYPE OF EVENT:	Closing
COMPANY ADDRESS:	3769 Route 20 East	WARN NOTIFIED DATE:	01/12/99
		FIRST LAYOFF DATE:	03/12/99
CITY, STATE, ZIP:	Freeport, IL 61032	# WORKERS AFFECTED:	585
COMPANY CONTACT:	John Czervionke	EVENT CAUSES:	Not provided
TELEPHONE:	815/235-6370		
SUBSTATE AREA & NUMBER:	S04		
TYPE OF COMPANY:	Rubber & Misc. Plastic Products	COMPANY SIC:	3011
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	
COMPANY NAME:		TYPE OF EVENT:	
COMPANY ADDRESS:		WARN NOTIFIED DATE:	
		FIRST LAYOFF DATE:	
CITY, STATE, ZIP:		# WORKERS AFFECTED:	
COMPANY CONTACT:		EVENT CAUSES:	
TELEPHONE:			
SUBSTATE AREA & NUMBER:			
TYPE OF COMPANY:		COMPANY SIC:	