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Date: 03-21-03  
Time: 11:27:37

WESTSIDE MEDICAL CLINIC  
Default Comparison - Demand Statements

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| Row | Col  | Field# | Len | Just | Field Description              | Default | Len | Just |
|-----|------|--------|-----|------|--------------------------------|---------|-----|------|
| 028 | 0030 | 67     | 20  | L    | LINE: PROCEDURE DESCRIPTION 1  |         | 40  | L    |
| 029 | 0030 | 68     | 20  | L    | LINE: PROCEDURE DESCRIPTION 2  |         | 40  | L    |
| 030 | 0030 | 69     | 20  | L    | LINE: PROCEDURE DESCRIPTION 3  |         | 40  | L    |
| 031 | 0030 | 70     | 20  | L    | LINE: PROCEDURE DESCRIPTION 4  |         | 40  | L    |
| 032 | 0030 | 71     | 20  | L    | LINE: PROCEDURE DESCRIPTION 5  |         | 40  | L    |
| 033 | 0030 | 72     | 20  | L    | LINE: PROCEDURE DESCRIPTION 6  |         | 40  | L    |
| 034 | 0030 | 73     | 20  | L    | LINE: PROCEDURE DESCRIPTION 7  |         | 40  | L    |
| 035 | 0030 | 74     | 20  | L    | LINE: PROCEDURE DESCRIPTION 8  |         | 40  | L    |
| 036 | 0030 | 75     | 20  | L    | LINE: PROCEDURE DESCRIPTION 9  |         | 40  | L    |
| 037 | 0030 | 76     | 20  | L    | LINE: PROCEDURE DESCRIPTION 10 |         | 40  | L    |
| 038 | 0030 | 77     | 20  | L    | LINE: PROCEDURE DESCRIPTION 11 |         | 40  | L    |
| 039 | 0030 | 78     | 20  | L    | LINE: PROCEDURE DESCRIPTION 12 |         | 40  | L    |
| 040 | 0030 | 79     | 20  | L    | LINE: PROCEDURE DESCRIPTION 13 |         | 40  | L    |
| 041 | 0030 | 80     | 20  | L    | LINE: PROCEDURE DESCRIPTION 14 |         | 40  | L    |
| 042 | 0030 | 81     | 20  | L    | LINE: PROCEDURE DESCRIPTION 15 |         | 40  | L    |

Figure 13-2 Default Comparison Report