 FORM 4		AND EXCHANGE COMMISSION n, D.C. 20549		OMB APPRO	VAL
[] Check this box if no longer subject to Section 16. Form 4 Filed or Form 5 obligations Sect may continue. See Instruction 1(b).	pursuant to Section 10	c Utility Holding Company	change Act of 1934, Act of 1935	OMB Number: Expires: Septer Estimated average be hours per response.	3235-0287 mber 30, 1998 urden
(Print or Type Responses)					
1. Name and Address of Reporting Person*			6. Relationsh	ip of Reporting Person Check all applicable)	n to Issuer
Swinney Robert S.			[X] Direc	tor [ ] 10% O	wner
(Last) (First) (Middle)	3. IRS or Social Security Number of Reporting Person		Offic	er (give Other title below)	Other (specify below)
951 Calle Amanecer	(voluncal)				
(Street) San Clemente, CA 92673		<ol> <li>If Amendment, Date of Origina (Month/Year)</li> </ol>	1 7. Individual Applicable X Form f	iled by One Reporting Person	
			Form f Person	iled by More than One	Reporting
(City) (State) (Zip)					
1. Title of Security (Instr. 3)	2. Trans- 3. Trans- action action Date Code (Instr (Month/ Day/ Year) Code	4. Securities Acqui or Disposed of ( (Instr. 3, 4 and . 8)  (A) or  W Amount (D)	red (A) 5. Amount (D) Securi (5) Benefi (Owned (Instr (Price) and 4)	of 6. Owner- 7 ties ship cially Form: at Direct Month (D) or In- (Instr. 4)	Nature of Indirect Beneficial Ownership (Instr. 4)
	2/3/99 S	5,000 D	18.25 20,225	D	
Common Stock by spouse,					
(a) See first column (b) Dr. Swinney disclaims benef					
Reminder: Report on a separate 1 * If the form is filed by more  FORM 4 (continued)	Table II - Derivating (e.g., puts.	we Securities Acquired, D, calls, warrants, option	isposed of, or Bene	SEC ficially Owned rities)	(Over) 1474 (7-96)
		action Deri Code Secu (Instr. 8) Acqu or D of (	vative cisab rities Expir ired (A) Date isposed Day/Y D) (Instr.	ear)	
	-	Code V (A)	(D) Exer-	tion Title Date	Number of Shares

<sup>1.</sup> Title of Derivative Security (Instr. 3)

<sup>8.</sup> Price of Deriv-

	ative Security (Instr. 5)	ative Securities Beneficially Owned at End of Month (Instr. 4)	(I) (Instr. 4)	Ownership (Instr. 4)	
Explanation of R	esponses:				
** Intentional misst omissions of fact Federal Criminal See 18 U.S.C. 100 15 U.S.C. 78ff(a)		, - ,	Robert Swinney		
	nal Violations 1001 and		**Signature of Reporting Person	Date	

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  ${\tt OMB\ Number.}$ 

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