

2520032900718

November 20, 1991

Office of Employee Benefits Security
Labor Management Services Administration
U.S. Department of Labor
Washington, DC 20216

To the Secretary of Labor:

In order to comply with the requirements of the alternative reporting and disclosure method under ERISA, Title 1, Part 1, as provided for an unfunded or insured pension plan for a select group of management or highly compensated employees in D. O. L. Reg. 2520.104-23, the following information is provided by the undersigned plan administrator:

- (1) The name of the employer is:
Bethany Animal Hospital
- (2) The mailing address of the employer is:
2400 Bethany Road
Sycamore, Illinois 60178
- (3) The employer's federal identification number (FEIN) is:
36-3063194
- (4) The number of plans and the number of participants in each plan is:
1 plan covering 1 employee.

The above named employer maintains this plan primarily for the purpose of providing deferred compensation in the form of salary continuation benefits to a select group of management or highly compensated employees. The employer will provide a copy of the agreement to the Secretary of Labor upon request.

Bethany Animal Hospital

By:

Charles Anthony
Plan Administrator

2/18/92
Date.