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MEDICAL AREA SERVICE CORPORATION

February 3, 1992

Office of Employee Benefits Security
Labor Management Service Administration
U. S. Department of Labor
Washington, D.C. 20216

RE: NOTICE OF PLAN OF DEFERRED COMPENSATION

Gentlemen:

Pursuant to DOL Reg. Sec. 2520.104-23, the undersigned employer hereby files the following information with respect to its plan of deferred compensation.

1. Name and Address of Employer:

Medical Area Service Corporation
375 Longwood Avenue, Boston, MA 02215

2. Federal Employer Identification No. (EIN):

04-2507445

3. The Employer maintains one (1) plan of deferred compensation primarily for the purpose of providing compensation to a select group of management or highly-compensated employees.

4. One (1) employee is covered by such plan.

Very truly yours,

Roseanna S. Creager
Vice President, Finance

RSC:rl

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