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U.S. DEPT. OF LABOR
PUBLIC DISCLOSURE
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TOP HAT PLAN REPORTING AND DISCLOSURE STATEMENT

DOL Reg. Section 2520.104-23 provides Top Hat Plans with an alternative method of complying with the reporting and disclosure requirements of Part 1 of Title I of ERISA. This alternative is available to employee benefit plans:

- ◆ which are maintained by an employer primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and
- ◆ for which benefits (i) are paid as needed solely from the general assets of the employer, (ii) are provided exclusively through insurance contracts or policies, the premiums for which are paid directly by the employer from its general assets, issued by an insurance company or similar organization which is qualified to do business in any state, or (iii) both.

As administrator of a plan described above, and in order to satisfy the reporting and disclosure provisions of Part 1 of Title I of ERISA by the filing of a statement with the Secretary of Labor, the following statements are made in accordance with the requirements noted above

Name of Employer: Community Memorial Healthcare, Inc.

Address of Employer: 708 North 18th Street, Marysville, KS 66508

EIN assigned by the IRS: 48-0630224

Employer Declaration: The above-referenced employer maintains a plan or plans primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

Number of such plans maintained by the above-referenced employer: 1

Number of employees in each of the above-referenced plans: 3

DATE: 5-21-02

BY: Linda Pauland
Title: Plan Administrator

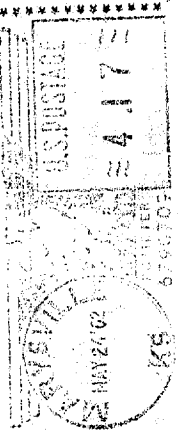
PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



7000 0520 0021 5533 6384

**RETURN RECEIPT
REQUESTED**



COMMUNITY MEMORIAL HEALTHCARE, INC.

708 North 18th Street
Marysville, Kansas 66508-1399



TO:
Top Hat Plan Exemption
Pension & Welfare Benef. Admin.

100