

U.S. DEPARTMENT OF LABOR
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To: Office of Pension and Welfare Benefit Programs
Labor Management-Services Administration
U.S. Department of Labor
Washington, D.C. 20216

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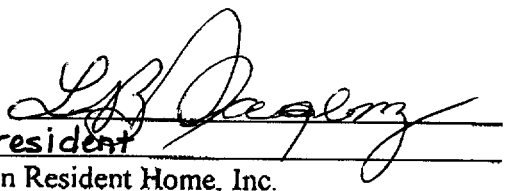
From: Employer: Markesan Resident Home, Inc.
Employer Identification Number: # 39-1526581
Address: 1130 N. Margaret St. , Box 130 , Markesan, WI 53946
Date: September 25, 2002

This document constitutes the statement required by 29 C.F.R. Section 2520.104-23(a)(1) to be filed with the Secretary of Labor in respect to Non-Qualified Deferred Compensation Plan maintained by the above employer.

The employer currently maintains 1 (one) Non-Qualified Deferred Compensation Plan(s) for executives who are members of a select group of management or who are highly compensated.

The number of participants in each plan is as follow:

- Plan 1 Miriam Ownby
- Plan 2 _____
- Plan 3 _____
- Plan 4 _____

Signed
Plan Administrator: 
Title: Board President
Employer: Markesan Resident Home, Inc.



Markean Resident Home, Inc.

A Continued Commitment to Quality and Caring Since 1961

1130 N. Margaret St. • P.O. Box 130
Markesan, Wisconsin 53946

CERTIFIED MAIL



7000 1530 0000 7641 4796

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