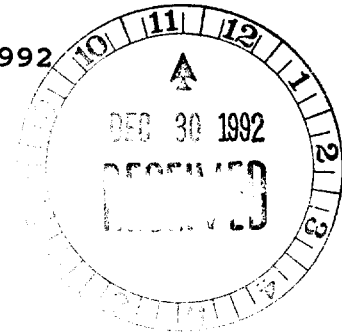


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Fust, Charles, Chambers & Harfosh

CERTIFIED PUBLIC ACCOUNTANTS

December 15, 1992



Top Hat Exemption
Pension And Welfare Benefits Administration
Room N-5644
U.S. Dept. of Labor
200 Constitution Ave. N.W.
Washington, D.C. 20210

RE: Selflock Screw Products Company, Inc. Deferred Compensation Plan

Gentlemen:

On behalf of the above captioned employer, we hereby submit the information required by DOL Regulation Section 2520.104-23(b):

1. Name of Employer: Selflock Screw Products Company, Inc.
2. Address of Employer: Marcy Street, Box 340
E. Syracuse, NY 13057
3. Tax Identification Number: 16-0958024
4. The employer maintains the plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.
5. Number of Plans: 1
6. Number of Employees in the Plan: 1

Please acknowledge receipt of this letter by time stamping and returning to me the enclosed duplicate of it. A postage paid return envelope is provided for your convenience.

Very truly yours,

Joseph L. Charles
Joseph L. Charles
Partner

JLC:mjs

Fust, Charles, Chambers & Harfosh

CERTIFIED PUBLIC ACCOUNTANTS

December 15, 1992



U.S. Department of Labor
Pension & Welfare Benefits Administration
P.O. Box 75212
Washington, D.C. 20013-5212

RE: Selflock Screw Products Company, Inc.
Deferred Compensation Plan (16-0958024)

Gentlemen:

In accordance with your notice on Civil Penalty Relief for Top-Hat Plans dated July 24, 1992 (57 FR 33019), we hereby submit the following:

1. A duplicate of the statement required by DOL Regulation 2520.104-23. The original has been filed on this date.
2. A check for \$1,000 representing the late filing penalty.

If you require any further information, please contact me at any time.

Very truly yours,

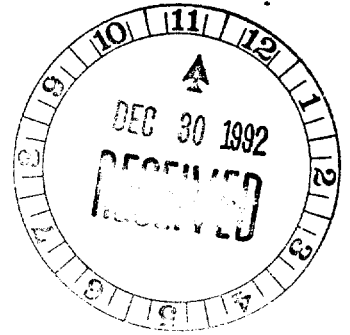
Joseph L. Charles
Joseph L. Charles
Partner

17,799

JLC:mjs

Enclosures

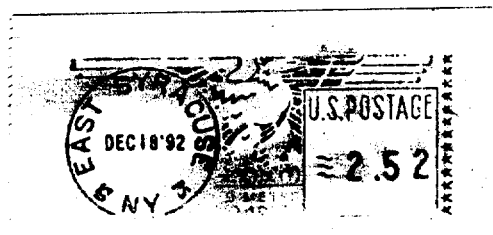
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CERTIFIED

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MAIL



fosh

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ITS ADMINISTRATION

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