

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 plan of deferred compensation for a select group of management or highly compensated employees in D.O.L. Reg. Section 2520.104-23, the following information is provided by the undersigned Plan Administrator:

- 1. The name of the employer is:  
MAGNETEK, INC
- 2. The mailing address of the employer is:  
26 CENTURY BLVD NASHVILLE, TN 37229
- 3. The employer's federal identification number (EIN) is:  
X 39-1139625
- 4. The number of plans and the number of participants in each plan is:  
ONE

DOL-PWBA  
PUBLIC DISCLOSURE  
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The above-named employer maintains this plan primarily for the purpose of providing deferred compensation to a select group of management or highly compensated employees. The employer will provide a copy of the agreement(s) to the Secretary of Labor upon request.

By: David P. Reiland  
(Name of Employer)  
Plan Administrator  
DAVID P. REILAND

Dated: 12/28/95