

WISCONSIN CLUB

SINCE 1890

2520040763403

January 28, 2004

Top Hat Plan Exemption
Pension and Welfare Benefits Administration, Room N-5644
U.S. Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

To Whom It May Concern:

The undersigned declares that the employer described below maintains the following plans primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

In compliance with Labor Reg. §2520.104-23 the undersigned provides the following information with respect to the plan:

Employer:

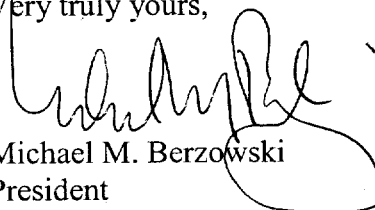
Employer Name: Wisconsin Club, Inc.
Address: 900 West Wisconsin Avenue
Milwaukee, Wisconsin 53233

EIN#: 39-1805782

Plans:

Number of Employees in Plan #1: 2

Very truly yours,



Michael M. Berzowski
President



7106 4575 1292 2868 2748

RETURN RECEIPT REQUESTED

Top Hat Plan Exemption
Pension & Welfare Benefit Admin. Room N-6544
U.S. Dept. of Labor
200 Constitution Avenue NW
Washington, DC 20210

