



2520040182351

September 21, 1994

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 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 or insured pension plan for a select group of management or highly compensated employees in D.O.L. Reg. Sec. 2520.104-23, the following information is provided:

1. The name of the employer is: W. W. Wallwork, Inc.
2. The mailing address of the employer is:

P.O. Box 1819
Fargo, ND 58107
3. Employer's federal identification number(EIN): 45-0394131
4. The employer maintains 2 plans covering 2 employees.

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

Sincerely,

A handwritten signature in cursive script, appearing to read 'W.W. Wallwork', written over a horizontal line.

Plan Administrator

