



Henneman Raufeisen
AND ASSOCIATES INC

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July 11, 1996

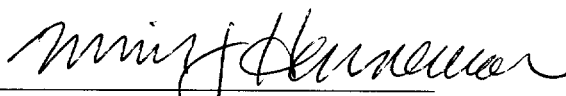
Office of Employee Benefits Security
Labor Management Services Administration
United States Department of Labor
Washington, D.C. 20216

To the Secretary of Labor:

To comply with the requirements of the alternative reporting and disclosure method under ERISA Sec. 110 applicable to unfunded or insured welfare benefit plans for a select group of management or highly compensated employees, as set forth in 26 CFR Sec. 2520.104-24, the following information is provided by the undersigned plan administrator:

1. The name of the employer is: Henneman Raufeisen and Associates, Inc.
2. The mailing address of the employer is: 1605 S. State Street
Champaign, IL 61820
3. The employer identification number (EIN) of the employer is: 37-1016100
4. The number of plans is three (3) and the number of participants in the plans is: one (1)

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

By: 
President (the "Plan Administrator")

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PUBLIC DISCLOSURE
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