



2520032032583

Dear Sir/Madam;

We are in receipt of your statement filed with the Secretary of Labor registering your deferred compensation plan (under 29 CFR 2520.104-23) for the above company.

The following information was omitted in the initial filing. Please furnish the necessary information indicated so we may complete your file.

Employer Identification Number (EIN) (9 digits) Missing 71 0511756

Address of participating company _____

Declaration (e.g., plan is for highly compensated employee(s))

Number of employees participating in the plan(s) _____

Number of plans _____

Other: _____

If the plan has terminated, please give the date of termination: ___/___/___

Please return this letter with the appropriate items completed within 30 days to:

Pension and Welfare Benefits Administration
U.S. Department of Labor
Frances Perkins Building, Room N-5644
200 Constitution Avenue, N.W.
Washington, D.C. 20210

Sincerely

Files and Disclosure Program Manager
Office of Program Services



ARKANSAS EDUCATION ASSOCIATION FEDERAL CREDIT UNION

1500 West Fourth Street
Little Rock, Arkansas 72201
(501) 375-3792

TO: Pension and Welfare Benefits Administration
Room N-5644
U.S. Department of Labor
200 Constitution Avenue N.W.
Washington, D.C. 20210

FROM: AEA Federal Credit Union
EID: 71-0511756
1500 West Fourth Street
Little Rock, AR 72201

As required by 29 C.F.R. Sec. 2520.104-23 (a)(1), we are filing this notice with the Secretary of Labor regarding the Deferred Compensation Agreement we have established.

The AEA Federal Credit Union has established a Deferred Compensation Plan for employees who are members of a select group of management or who are highly compensated. One employee has signed Agreements to defer compensation under this plan.

Date: 4-2-93

Employer: AEA Federal Credit Union

BY: *J. J. D. Blount*
Title: *Chairman of the Board*

[Faint, illegible stamp or mark]