

# Eugene Parrs, P.C.

Attorney at Law

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June 22, 1998

Top Hat Exemption  
Pension And Welfare Benefits Administration  
Room N-5644  
U.S. Dept. of Labor  
200 Constitution Ave. N.W.  
Washington, D.C. 20210

2520042392760

## Re: J. Kozel & Son Supplemental Pension Plan

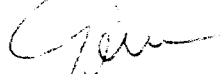
Gentlemen:

On behalf of the above captioned employer, we hereby submit the information required by DOL Regulation Section 2520.104-23(b):

1. Name of Employer: J. Kozel & Son
2. Address of Employer: 1150 Scottsville Road  
Rochester, NY 14624
3. Tax Identification Number: 16-0840016
4. The employer maintains the plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.
5. Number of Plans: 1
6. Number of Employees in the Plan: 1

Please acknowledge receipt of this letter by time stamping and returning to me the enclosed duplicate of it. A postage paid return envelope is provided for your convenience.

Very truly yours,

  
Eugene Parrs

**Eugene Parrs, P.C.**  
Attorney at Law  
144 Exchange Boulevard  
Rochester, New York 14614



**RETURN RECEIPT  
REQUESTED**



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