

**ANTWERP INSURANCE AGENCY INC.***General Insurance*

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ANTWERP, OHIO 45813

January 24, 1995

Top Hat Exemption  
 Pension and Welfare Administration Room N-5644  
 U.S. Department of Labor  
 200 Constitution Avenue, N.W.  
 Washington, DC 20010

To the Secretary of Labor:

In order to comply with the requirements of the alternative reporting and disclosure method under ERISA, Part I, Title I, as provided for an unfunded or insured welfare plan for a select group of management or highly compensated employees in D.O.L. Reg., 2520.104-23, the following information is provided by the undersigned plan administrator:

1. The name of the employer is Antwerp Insurance Agency, Inc.
2. The mailing address of the employer is 312 S. Main St., Antwerp, OH 43813.
3. The employer's federal identification number (EIN) is 34-1012260.
4. The number of plans and the number of participants in each plan is: one plan, one participant. The plan is a supplemental income plan and agreement establishing a welfare plan benefit for a select group and management and highly compensated employees. The employer will provide a copy of the agreement to the Secretary of Labor upon request.
5. The plan was adopted effective on December 23, 1994, and this filing is made within 120 days after the Plan became subject to Part 1 of Title I of ERISA.

ANTWERP INSURANCE AGENCY, INC.

*David R. Deek*

President



HIGHEST STANDARDS  
OF PROFESSIONAL SERVICE

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