

2520052090441



**DEPARTMENT OF LABOR LETTER**

To The Secretary of Labor:

In compliance with the disclosure and reporting requirements under Part 1 of Title 1 of the Employee Retirement Income Security Act of 1974 and the Department of Labor Regulations, 29 C.F.R. Section 2520. 104-23, for unfunded insured deferred compensation programs, for a select group of management or highly compensated Employees, the following information is provided by the undersigned Employer.

Employer Name: WESTWARD HO COUNTRY CLUB, INC.

Employer Address: Box 1889, Sioux Falls, South Dakota 57101

Employer Identification Number: 46-0306396

The above Employer has established and will maintain this plan primarily for the purpose of providing supplemental salary benefits for a select group of highly compensated Employees.

Name and social security number of each plan participant.

Employee Name: Social Security Number:

THEODORE G. THIE

Dated at Sioux Falls, S.D. this 16<sup>th</sup> day of June, 2000.

WESTWARD HO COUNTRY CLUB, INC.

1/1

U.S. DEPT. OF LABOR  
FWBA/PUBLIC DISCLOSURE  
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# WESTWARD HO

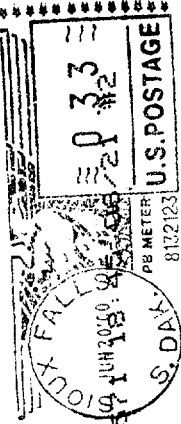
C O U N T R Y C L U B

3400 WEST 22ND STREET • P.O. BOX 1889 • SIOUX FALLS, SD 57101

SIOUX FALLS SD

PB METER  
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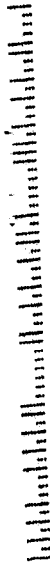
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South Dakota Department of Labor  
DIVISION OF LABOR & MANAGEMENT  
700 Governors Drive  
Pierre, SD 57501-2291



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ERISA  
US DEPARTMENT OF LABOR  
200 CONSTITUTION AVE NW  
WASHINGTON DC 20210

*For Mrs. Fisher*

*15619*