

ALTERNATIVE COMPLIANCE STATEMENT

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

In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974 for unfunded or insured pension plans for a select group of management or highly compensated employees, specified in the Department of Labor Regulations, 29 CFR 2520.104-23, the following information is provided by the undersigned employer.

Name and Address of Employer: BRIGHTON NC MACHINE CORPORATION

Employer Identification Number: 38- 180 1812

BRIGHTON NC MACHINE CORPORATION maintains a plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

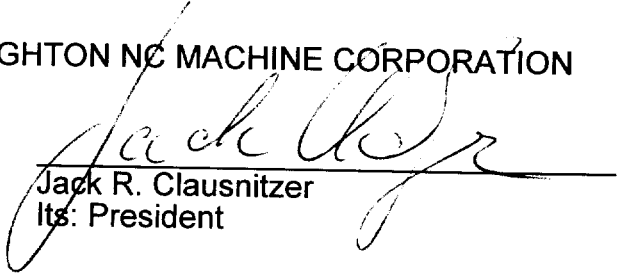
Number of Plans and
Participants in Each
Plan: 2 - Plan covering:

Shirley Barton
Jack R. Clausnitzer

Dated: 12/16, 1999

BRIGHTON NC MACHINE CORPORATION

By:


Jack R. Clausnitzer
Its: President

LAW OFFICES
COUZENS, LANSKY, FEALK, ELLIS,
ROEDER & LAZAR, P.C.
COUNTRY CLUB OFFICE CENTRE
39395 WEST TWELVE MILE ROAD, SUITE 200
FARMINGTON HILLS, MICHIGAN 48331-2913

CERTIFIED

Z 561 147 442

MAIL

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PENSION PLAN WELFARE BENEFITS
ADMINISTRATION
US DEPT OF LABOR
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WASHINGTON DC 20210

