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August 2, 1999

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

Re: Notice of Plan of Deferred Compensation

Gentlemen:

Pursuant to DOL Reg. Sec. 2520.104-23, the undersigned employer hereby files the following with respect to its plan of deferred compensation:

1. Name and Address of Employer:  
American Board of Obstetrics and Gynecology, Inc.  
2915 Vine Street, Suite 300  
Dallas, Texas 75204-1069
2. Federal Employer Identification No. (EIN):  
34-0787715
3. The Employer maintains 1 plan of deferred compensation primarily for the purpose of providing deferred compensation to a select group of management or highly-compensated employees.
4. 1 employee is covered by such plan.

Very truly yours,



By: NORMAN F. GANT, JR.  
Title: EXEC. DIRECTOR

