



EMPRISE BANK

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257 North Broadway
P.O. Box 2970
Wichita, Kansas 67201-2970
316-383-4400

April 19, 2005

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

2520052092819

Dear Sir or Madam:

Pursuant to Department of labor Regulation 2520.104 23, the following information is being provided regarding a nonqualified Incentive Deferred Compensation Plan and Voluntary Deferred Compensation Plan and Bank Owned Life Insurance sponsored by our organization for a select group of management or highly compensated employees.

- 1. Name of the employer: Emprise Bank
- 2. Mailing address of the employer: 257 North Broadway, Wichita, KS 67202
- 3. Employer's Federal Identification Number (EIN): 480807333
- 4. Number of plans maintained: 2
- 5. Number of participants: 12 (6 individuals, each participating in 2 plans)
- 6. Date plan was implemented: January 20, 2005

We will provide plan documents upon request in accordance with ERISA Section 104(a)(1).

Please contact us if you have any questions on any of the above information.

Sincerely,

EMPRISE BANK

L. Thomas Veatch
Plan Administrator

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EMPRISE BANK

EMPRISE BANK

267 North Broadway
P.O. Box 2970
Wichita, Kansas 67201-2970

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*Request
Revised*

CERTIFIED MAIL™

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