

2520052094007

*Waverley*  
COUNTRY CLUB

December 24, 1992

CERTIFIED MAIL/RETURN RECEIPT REQUESTED

Pension and Welfare Benefits Administration  
P.O. Box 75212  
Washington, D.C. 20013-5212

Top Hat Plan Filing Under Civil  
Penalty Relief Program

RE: A plan of deferred compensation sponsored by -

WAVERLEY COUNTRY CLUB

(the "Employer")

Dear Sir or Madam:

In accordance with Pension and Welfare Benefits Administration ("PWBA") Notice on Civil Penalty Relief for Top Hat Plans, Late Filers, as published in the Federal Register on July 24, 1992 (57 FR 33019), the following information is disclosed and the accompanying payment is being made to the U.S. Department of Labor ("DOL") in order to comply with the reporting and disclosure requirements of the Employee Retirement Income Security Act of 1974 ("ERISA"), under the alternative method of compliance as set forth by DOL Regulation #2520.104-23.

1. The above referenced Employer maintains a plan of deferred compensation in the form of the Club Managers Association of America Master Deferred Compensation Plan Pursuant to Section 457 of the Internal Revenue Code (the "Plan").
2. The address of the Employer is: 1100 S.E. WAVERLEY DRIVE  
PORTLAND, OR 97222
3. The employer identification number of the Employer is 93-0307250
4. The Employer maintains the Plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.
5. The number of employees in the Plan is 11

If you require a copy of the plan document or any additional information, please do not hesitate to contact the undersigned.

*DRC*  
JAN 23 1993

WAVERLEY COUNTRY CLUB

By *[Signature]*

MANAGER

*28,785*



DRC  
JAN 23 1993

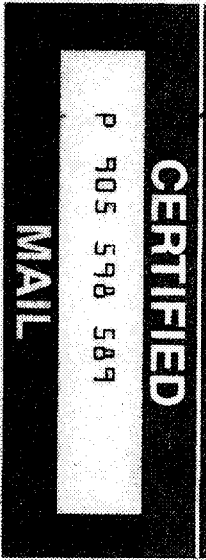
28,785

**C O U N T R Y C L U B**

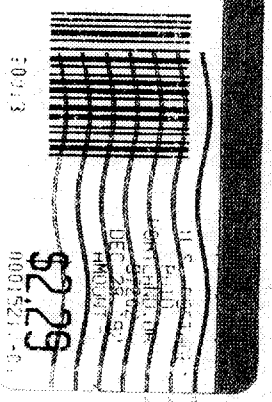
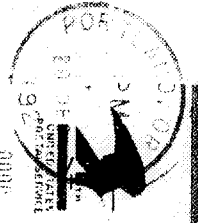
1100 S. E. WAVERLEY DRIVE  
 PORTLAND, OREGON 97222-7499

*Waverley*

Fold at line over top of envelope to the right of the return address.



**RETURN RECEIPT  
 REQUESTED**



WAVERLEY COUNTRY CLUB—Portland, OR 97222

INVOICE DATE	INVOICE NUMBER	DESCRIPTION	OUR REFERENCE NO.	AMOUNT OF INVOICE	DEDUCTIONS	NET AMOUNT
		LATE FILING ON CLUB MANAGERS ASSOCIATION OF AMERICA DEFERRED COMPENSATION PLAN THROUGH AETNA				1000.00

**REMITTANCE STATEMENT**

DETACH THIS STATEMENT BEFORE DEPOSITING CHECK