

ERISA LABOR DEPARTMENT STATEMENT

U.S. DEPT. OF LABOR
FWSA/PUBLIC DISCLOSURE
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To: Office of Pension and Welfare Benefit Program
Labor Management-Service Administration
U.S. Department of Labor
Washington, DC 20216

From: McLees Incorporated
E.I.N. : 81-0271708
Address: P.O. Box 1080
Belgrade, MT 59714

DATED this 5th day of July 2000

This document constitutes the statement required by 29 C.F.R. 2520, 104 23(a)(1) to be filed with the Secretary of Labor in respect to Nonqualified Benefit Plans maintained by the above employer.

The employer currently maintains 1 Non qualified Benefit Plan(s) for managerial and highly compensated employees. Copies of the Plan(s) will be provided to the Department upon the receipt of a written request.

The number of participants in each Plan are as follows:

Plan 1: 1

Plan 2:

Plan 3:

SIGNED:

Plan Administrator: RE McLees

Title: President of McLees Incorporated

Employer: McLees Incorporated



Heating & Air Conditioning
Single Ply Roofing
Industrial Sheet Metal
Exterior Insulation & Finish

P.O. Box 1080 • Belgrade, MT 59714



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