

2520060620737

**Alternative Reporting And Disclosure Statement
For Nonqualified Deferred Compensation Plans**

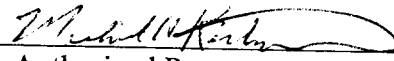
To: Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-1513
U.S. Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

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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 un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: Community Medical Centers, Inc.
2. The mailing address of the Employer is: 701 East Channel Street
P.O. Box 779
Stockton, CA 95201-0779
3. The Employer Identification Number is: 94-2437106
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:
One Plan covering 29 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Pension and Welfare Benefit Program upon request.

Community Medical Centers, Inc.
A California Organization

By: 
Authorized Person

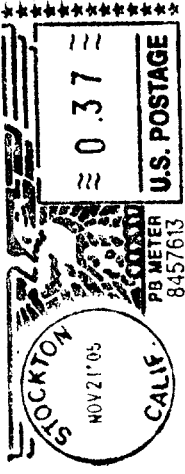
Dated: November 16, 2005



*A Regional Primary Health Care System
Serving San Joaquin, Yuba, Sutter, and Colusa Counties*

P.O. Box 779 • Stockton, CA 95201-0779

RETURN SERVICE REQUESTED



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