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4/14/2006

Top Hat Plan Exemption
Pension and Welfare Benefits Administration
Room N-5638
United States Department of Labor
200 Constitution Avenue, N.W.
Washington, D C 20210

Dear Sir or Madam:

In order to comply with the requirements of the alternative reporting and disclosure method under ERISA, Parts 1, Title 1, as provided for an unfunded plan for a select group of management or highly compensated employees in the D.O.L. Regulation 2520.104-23 the following information is provided:

1. The name of the employer is:

Intermountain Staffing Resources

2. The Mailing Address of the employer is

PO Box 65157 Salt Lake City, UT. 84165

3. The Employer's Federal identification number (EIN) is:

87-0297877

4. The number of plans and the number of participants in each plan is:

1 Plan covering 3 employees. The above named employer maintains this plan primarily for the purpose of providing deferred compensation benefits to a select group of management or highly compensated employees.

The employer will send a copy of all plan documents and agreements to the Secretary, upon request.

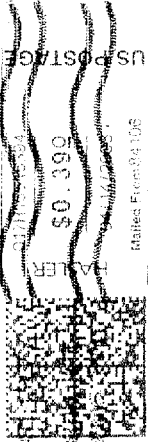
Respectfully submitted,



**INTERMOUNTAIN
STAFFING RESOURCES**

P.O. BOX 65157 / SALT LAKE CITY, UT 84165-0157

SALT LAKE CITY, UT
14 APR 2009



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Washington, DC 20210.

