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February 20, 2007

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

#7004 1160 0007 3895 4760

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

RE: Education Credit Union Supplemental Retirement Benefits Agreement Plan

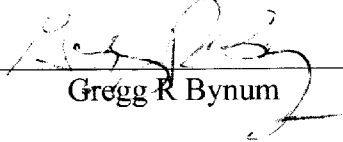
In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974, as amended, for unfunded pension plans maintained by an employer for a select group of management or highly compensated employees, specified in Department of Labor Regulations Section 2520.104-23, the following information for the above referenced Program is provided by the undersigned administrator of the Program:

1. The name of the Employer is: Education Credit Union
2. The mailing address of the Employer is: Education Credit Union,
Operations Center, 6203 Hillside, Amarillo, TX 79109-7193
3. The Employer Identification Number is: 075-069-3720 75-0693720
4. The above named Employer maintains the Program primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. The Employer currently maintains one "top-hat" program.
6. As of the effective date of the Program, there were two participants.

7. Benefits under the Program are paid as needed solely from the general assets of the Employer and its affiliates.
8. The Employer will provide a copy of the Program documents to the office of Employee Benefits Security Administration upon request.

We would appreciate your stamping and returning to our office the enclosed copy of this letter in order to indicate receipt of this letter by the Department of Labor.

By: _____


Gregg R Bynum

Title: President /CEO
Education Credit Union

cc: William A. Gray, Esq
Regular Mail

