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April 15, 2008

U.S. Department of Labor
Employee Benefits Security Administration
Top Hat Plan Exemption
200 Constitution Avenue, NW, Suite N-1513
Washington, DC 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: **Sierra View Company**
2. The mailing address of the employer is: **4202 Douglas Blvd Ste 100**
Granite Bay, CA 95746
3. The employer's federal identification number (EIN) is: **68-0037084**
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,

Kennan Bridge
Secretary



4202 Douglas Blvd, Suite 100, Granite Bay, CA 95746



U.S. DEPT. of LABOR
EMP. BENEFITS SECURITY ADMIN.
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