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

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Re: ERISA REPORTING AND DISCLOSURE STATEMENT

To the Secretary of Labor:

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

The name of the employer is: Community Health Associates, Inc.

The employer's mailing address is: 269 Portland Way South

Galion, OH 44833

The employer's federal identification number (EIN) is: 34-1784017

The plans of employer and the number of participants covered in each plan is:
(Specify plan, effective date and number of employees covered)

Community Health Associates, Inc. 457(b) Top Hat Plan

Effective: January 1, 2008

Number of Employees: 2

The above-named employer maintains this plan primarily for the purpose of providing nonqualified deferred compensation benefits to a select group of management or highly compensated employees. The employer will provide a copy of the agreement to the Secretary of Labor upon request.

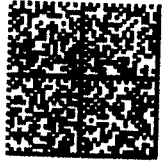
Employer: Community Health Associates, Inc.

By: Traci L. Bunnell

Date: April 1, 2008



269 Portland Way South
Galion, Ohio
44833



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