



2520130090125

ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT FOR
A NONQUALIFIED DEFERRED COMPENSATION PLAN

2012 DEC 31 AM 11:47
650A/PUBLIC/HR/HR/HR

To: Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-5644
US Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

INTERNATIONAL DISTRICT
MEDICAL & DENTAL CLINIC
& ADMINISTRATION

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In accordance with 29 CFR Section 2520.104-23 of the Department of Labor Regulations, which provides an alternative method for complying with the reporting and disclosure requirements of Part 1 of Title I of the Employee Retirement Income Security Act of 1974, you are hereby notified that the Employer identified below maintains the Plan identified below for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by this Plan are paid as needed solely from the general assets of that Employer.

Employer's Name: International Community Health Services

Employer's Address:

Employer Identification Number: 91-0947084

[ICHS 457(b) Eligible Deferred Compensation Plan For Tax-Exempt Employers],
which covers 30 Participants.

Total Number of 457(b) Plans: 1

[International Community Health Services]
Plan Administrator of the Plans Specified Above

Hermes Shahbazian, CFO: 

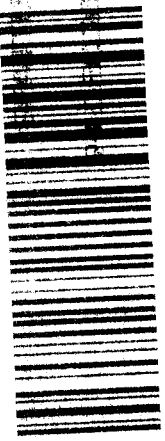
December 21, 2012



International
Community
HEALTH SERVICES

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