

## DORSEY &amp; WHITNEY LLP

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PILLSBURY CENTER SOUTH  
220 SOUTH SIXTH STREET  
MINNEAPOLIS, MINNESOTA 55402-1498  
TELEPHONE: (612) 340-2600  
FAX: (612) 340-2868

NEW YORK  
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**AMY P. WALTERS**  
**(612) 340-5691**  
**Fax (612) 340-7800**  
**walters.amy@dorseylaw.com**

January 2, 1997

**CERTIFIED MAIL****Return Receipt Requested**

Receipt No. P769772834

Top Hat Plan Exemption  
Pension and Welfare Benefits Administration  
Room N-5644  
U.S. Department of Labor  
200 Constitution Avenue NW  
Washington, D.C. 20210

Re: Imation Corporation

Dear Sir or Madam:

Pursuant to the alternative reporting and disclosure procedure of Section 2520.104-23 of the Department of Labor Regulations, the above-referenced employer hereby notifies you of its sponsorship of the Imation Excess Benefit Plan. The employer currently maintains one unfunded plan to provide deferred compensation for a select group of management or highly compensated employees. This Plan currently has 35 participants.

In addition, the required employer information is as follows:

Employer Name: Imation Corporation  
Employer Address: 1 Imation Place  
Endeavor Building 2E-10  
Oakdale, Minnesota 55128  
EIN: 41-1838504

If you have any questions, please contact me at the above address.

Very truly yours,

  
Amy P. Walters

APW:mym  
cc: Stephen Gottschalk  
Curt Cardinal