

**Alternative Reporting And Disclosure Statement
For Nonqualified Deferred Compensation Plans**

2013 JUN 27 PM 12:00
REGISTRATION SECTION

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

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 for un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: District Medical Group, Inc.
2. The mailing address of the Employer is: 2929 E. Thomas Road
Phoenix, AZ 85016
3. The Employer Identification Number is: 20-8106540
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:
Two Plans covering 66 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

District Medical Group, Inc.
An Arizona Organization

By: Kote Chundu
Authorized Person

Dated: 6-17-2013

Kote Chundu, M.D.
President and CEO
Date: 6/17/13

#DMG

Member Medical Group

Distinet Medical Group
2828 E Thomas Road
Phoenix, AZ 85018

TOP HAT PLAN EXEMPTION
EMPLOYEE BENEFITS SECURITY ADMIN
ROOM 11513
U.S. DEPARTMENT OF LABOR
200 CONSTITUTIONS AVE, N.W.
WASHINGTON DC 20210

