

APR 10 2013

13APR 10 09A

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

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

2013 APR 20 PM 1:13  
EBSA/PUBLIC AFFAIRS

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: Gerald Champion Regional Medical Ctr
2. The mailing address of the Employer is: 2669 Scenic Drive  
Alamogordo, NM 88310
3. The Employer Identification Number is: 85-0138775
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 Plan(s) covering 60 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

Gerald Champion Regional Medical Center  
A New Mexico Corporation

By: Michael Roll  
Authorized Person

Dated: 3/26/13

From: (919) 833-1042  
 Beth Bourgouin  
 Principal Financial Group  
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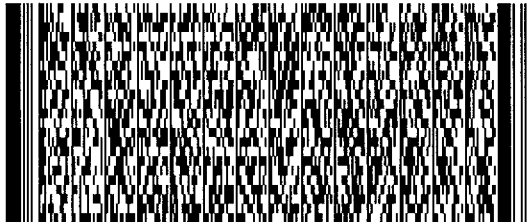
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**Top Hat Plan Exemption**  
**200 Constitution Ave.**  
**Room N 1513**  
**WASHINGTON, DC 20210**

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 Dept # H439-000

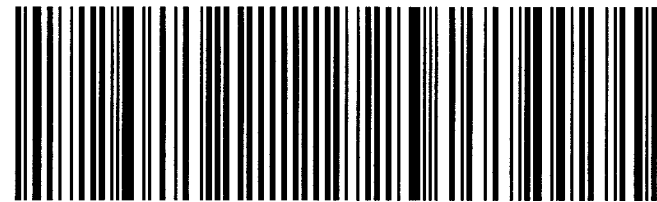
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