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October 28, 2013

2013-10-28 10:01:11

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

To the Secretary of Labor:

In order to comply with the requirements of the alternative reporting and disclosure method under ERISA, Title 1, 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. Section 2520.104-2B, the following information is provided by the undersigned Plan Administrator:

1. The name of the employer is **Alderson Engineering, Inc.**
2. The mailing address of the employer is: 407 Lakeside Drive, Southampton PA 18966
3. The employer's federal identification number is 23-2607231.
4. The number of participants in the Plan is one (1).
5. The adoption date of the Plan is January 1, 2014.

The employer maintains this Plan primarily for the purpose of providing deferred compensation 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.

Very truly yours,

**Alderson Engineering, Inc.**

By:



**Howard Alderson, President**

Please sign and date the enclosed copy of this letter and return to me in the enclosed stamped, addressed envelope.

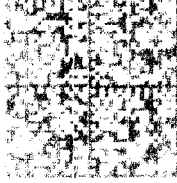
Signature

Date

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**CZAPLICKI & GREGOR, P.C.**

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