

**ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT  
FOR NONQUALIFIED DEFERRED COMPENSATION PLANS**

U.S. DEPT. OF LABOR  
EBSA/PUBLIC DISCLOSURE  
05 JUL 33 AM 11:43

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

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 Plans identified below for the purpose providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by these Plans are paid as needed solely from the general assets of that Employer.

U.S. DEPT. OF LABOR  
EBSA/PUBLIC DISCLOSURE  
05 AUG -2 PM 12:48

Employer's Name: **Area Agency on Aging, 10B, Inc.**  
Employer's Address: **1550 Corporate Woods Parkway  
Uniontown, Ohio 44685**

Employer Identification Number: **34-1314654**

Area Agency on Aging 457(b) Plan 1, which covers 4 participants.  
Area Agency on Aging 457(b) Plan 2, which covers 2 participants.

Total Number of Plans: 2

Area Agency on Aging, 10B, Inc.  
Plan Administrator of the Plans Specified Above

By: Sheri Mezza, HR Director

Date: 6/30/05

SLM/

1550 Corporate Woods Parkway, Suite 100, Uniontown, Ohio 44685



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