

FAMILY HEALTHCARE

NETWORK



Accredited By
The Joint Commission

OFFICES:

PLEASE CHECK FOR REPLY

CORPORATE ADMINISTRATION

305 EAST CENTER AVENUE
VISALIA, CA 93291
(559) 737-4700
(559) 737-4750 FINANCE & BILLING
(559) 734-1247 FAX

ANNEX

1137 WEST POPLAR AVENUE
PORTERVILLE, CA 93257
(559) 793-3505
(559) 793-3542 FAX

COMMUNITY RESOURCE BUILDING

323 WEST PUTNAM AVENUE
PORTERVILLE, CA 93257
(559) 793-3505
(559) 793-3172 FAX

VENTANILLA DE SALUD

7435 NORTH INGRAM AVENUE
FRESNO, CA 93711
(559) 438-1394
(559) 438-8791 FAX

CLINICAL SITES:

PLEASE CHECK FOR REPLY

CUTLER/OROSI

12586 AVENUE 408
OROSI, CA 93647
(559) 528-2804
(559) 528-7623 FAX

FARMERSVILLE

730 N. FARMERSVILLE BLVD.
FARMERSVILLE, CA 93223
(559) 747-1470
(559) 747-1478 FAX

GOSHEN

31180 ROAD 72
Visalia, CA 93291
(559) 651-2301
(559) 651-1584 FAX

HANFORD

329 W 8TH STREET
HANFORD, CA 93230
(559) 587-4532
(559) 589-1867 FAX

IVANHOE

33025 ROAD 159
IVANHOE, CA 93235
(559) 798-1877
(559) 798-1058 FAX

PORTERVILLE

1107 W. POPLAR AVENUE
PORTERVILLE, CA 93257
(559) 781-7242
(559) 793-3574 FAX

PORTERVILLE DENTAL

1133 W. POPLAR AVENUE
PORTERVILLE, CA 93257
(559) 781-7242
(559) 793-3147 FAX

SPRINGVILLE

35800 HIGHWAY 190
SPRINGVILLE, CA 93265
(559) 539-2324
(559) 793-3145 FAX

THREE RIVERS

41651 SIERRA DRIVE, SUITE A
THREE RIVERS, CA 93271
(559) 561-4683
(559) 561-4326 FAX

VISALIA-BRIDGE

501 NORTH BRIDGE STREET
VISALIA, CA 93291
(559) 734-1939
(559) 734-4384 FAX

VISALIA-OAK

400 EAST OAK AVENUE
VISALIA, CA 93291
(559) 741-4500
(559) 741-4579 FAX

WOODLAKE

201 E. Lakeview Ave.
WOODLAKE, CA 93286
(559) 564-0100
(559) 737-4921 FAX

WEBSITE ADDRESS

WWW.FHCN.ORG

May 15, 2014

Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-1513
U.S. Department of Labor
200 Constitution Avenue
Washington, DC 20210

This letter provides notice, pursuant to 29 CFR 2520.104-23, that the employer identified below has established and intends to maintain an unfunded plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

Name of Plan:
Employees:

Number of Participating

Family HealthCare Network 457(b)
Deferred Compensation Plan

40

Name of Sponsoring Employer and Employee Identification Number (EIN):

Family HealthCare Network

94-2525145

Address of Sponsoring Employer:

Family HealthCare Network
305 East Center
Visalia, CA 93291

Regards,

Dante Rosh

Director of Administrative Services

2014 MAY 21 09:13

CERTIFIED MAIL

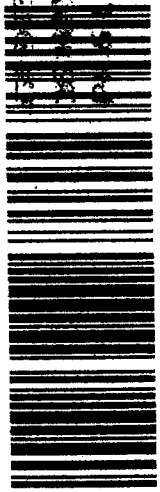


CORPO
305 EAST CENTER AV
VISALIA, CALIFORNIA

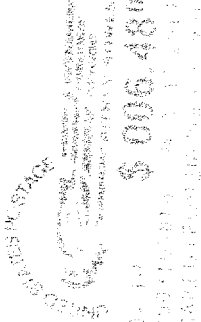


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