

ALTERNATIVE METHOD OF COMPLIANCE WITH  
THE REPORTING AND DISCLOSURE REQUIREMENTS OF  
PART 1 OF TITLE I OF THE  
EMPLOYEE RETIREMENT INCOME SECURITY ACT

Name of Employer: Alliance Community Hospital

Address of Employer: 200 E. State Street  
Alliance OH 44601

Employer Identification No.: 34-0714581

Under penalty of perjury, to the best of my knowledge and belief, Alliance Community Hospital maintains the Alliance Community Hospital 457(b) Plan, a plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees. As of the date of this filing, this is the only plan being maintained for this purpose. As of December 31, 2014, the Plan benefited five (5) participants.

Notwithstanding the foregoing, however, effective as of March 1, 2015, Alliance Community Hospital will maintain one (1) additional deferred compensation arrangement for a select group of management or highly compensated employees. The name of the new plan is the Alliance Citizens Health Association 457f Plan. The 457f Plan will have four (4) participants.

Subscribed and sworn to before me this 9<sup>th</sup> day of February 2015.

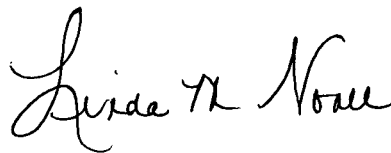


Paul H. Malesick II

Notary Seal



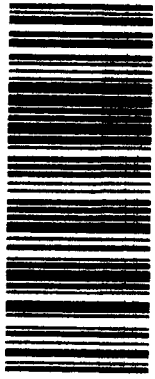
Linda M. Noall  
Notary Public, State of Ohio  
My Commission Expires 02-29-2016



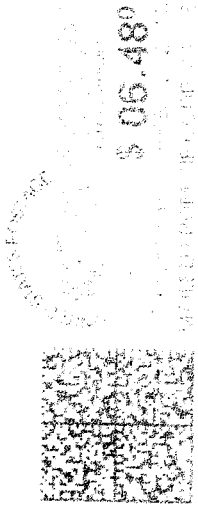
**CERTIFIED MAIL**



**KRUGLAK, WILKINS, GRIFFITHS  
& DOUGHERTY CO., L.P.A.** attorneys at law  
P.O. Box 36963  
Canton, OH 44735-6963



**7196 9008 9111 3099 89AL**  
RETURN RECEIPT REQUESTED



U.S. Department of Labor  
Employee Benefits Security Administration  
Top Hat Plan Exemption  
200 Constitution Avenue NW., N-1515  
Washington DC 20210



20210

