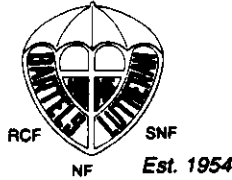


# the Bartels

LUTHERAN HOME  
CORPORATION



THE BARTELS  
LUTHERAN HOME  
MEMORIAL  
FOUNDATION  
Est. 1984



STANDARD FORM NO. 13

**Department of Labor  
Statement for Reporting and Disclosure  
(for Deferred Compensation Plans)**

TO: Office of Pension and Welfare Benefit Programs  
Labor Management-Service Administration  
U.S. Department of Labor  
Washington, DC 20216

FROM: Employer: Bartels Lutheran Home  
Employer Identification Number: 42-0752685  
Address: 1922 5<sup>th</sup> Avenue NW, Waverly, IA 50677

This document constitutes the statement required by 29 C.F.R., §2520.104-23(a)(1) to be filed with the Secretary of Labor in respect to nonqualified deferred compensation plans maintained by the above employer.

The employer currently maintains 1 nonqualified deferred compensation plan(s) for employees who are members of a select group of management or who are highly compensated.

The number of participants in each plan is as follows:

Plan 1 Debra K. Schroeder  
Plan 2 \_\_\_\_\_  
Plan 3 \_\_\_\_\_

Date: 2-20-97

[Signed] \_\_\_\_\_  
Administrator: \_\_\_\_\_  
Title: President Board of Directors of  
Employer: Bartels Lutheran Home

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