



**CLARA
MARTIN
CENTER**
COMMUNITY MENTAL
HEALTH SERVICES

April 21, 2016

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

2520161550034

2016 MAY -2 PM 4:33
DOSA/PUBLIC DISCLOSURE

Re: Notice of Plan of Deferred Compensation

Dear Sir/Madam:

Pursuant to DOL Regulation section 2520.104-23, the undersigned employer hereby files the following information with respect to its plan of deferred compensation.

1. Name and address of employer:

Clara Martin Center, Inc.
P.O. Box G
Randolph, VT 05060

2. Federal employer identification number: 03-0220733

3. The employer maintains a plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

4. The employer maintains one such plan that currently covers 1 employee.



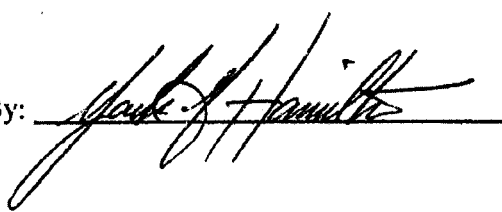
Green Mountain
United Way

P.O. Box G
Randolph
Vermont
05060-0167
802/728-4466
802/728-4197 fax

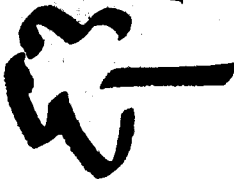
P.O. Box 278
Bradford
Vermont
05033-0278
802/222-4477
802/222-3242 fax

P.O. Box 816
Wilder
Vermont
05088-0816
802/295-1311
802/295-1312 fax

CLARA MARTIN CENTER, INC.

By: 

SLC-7752482-2

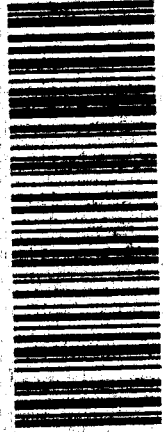


CLARA
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COMMUNITY MENTAL HEALTH SERVICES

P.O. Box 816, Wilder, Vermont 05088-0816

CERTIFIED MAIL



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