SCHEDULE C (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation

Service Provider Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974.

▶ File as an attachment to Form 5500.

Official Use Only

OMB No. 1210-0110

2006

This Form is Open to Public Inspection.

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For calendar plan year 2006 or fiscal plan year beginning and ending				MM/DD/YYYY	
A	Name	e of plan	В	Three-digit plan number ▶	
С	Plan	sponsor's name as shown on line 2a of Form 5500	D	Employer Identification Number	
P	art I	Service Provider Information (see instructions)	0		
1		ter the total dollar amount of compensation paid by the plan to all persons, her than those listed below, who received compensation during the plan year:			
2	desc	the first item below list the contract administrator, if any, as defined in the instructions. On the other items, list service providers in scending order of the compensation they received for the services rendered during the plan year. List only the top 40. 103-12 IEs should ter N/A in (c) and (d).			
	(a)	Name			
(b) Employer identification number (see instructions)					
	(c) (d)	Official plan position Relationship to employer, employee organization, or person known to be a party-in-interest	n	istrator	
	(e)	Gross salary or allowances paid by plan (f) Fees and commissions paid by plan		(g) Nature of service code(s)	
		.00 25		(see instructions) 1 2	
	(a)	Name			
	(b)	b) Employer identification number (see instructions)			
	(c) (d)	Official plan position Relationship to employer, employee organization, or person known to be a party-in-interest			
	(e)	Gross salary or allowances paid by plan (f) Fees and commissions paid by plan		(g) Nature of service code(s) (see	
				instructions)	

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500. Cat. No. 13515E Schedule C (Form 5500) 2006





(f) Fees and commissions paid by plan

(g) Nature of service code(s)

(see instructions)

Employer identification number (see instructions)

Gross salary or allowances paid by plan

Official plan position

Relationship to employer, employee organization, or person known to be a party-in-interest

(c)

(e)

