

Summary Annual Report
for
GROUP TRAVEL ACCIDENT INSURANCE PLAN

This is a summary of the annual report for the GROUP TRAVEL ACCIDENT INSURANCE PLAN, (Employer Identification No. 23-0628360, Plan No. 503) for the period January 1, 2005 to December 31, 2005. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

INSURANCE INFORMATION

The plan has a contract with Life Insurance Company of North America to pay the following types of claims incurred under the terms of the plan.

All Business Travel Accident claims

The total premiums paid for the plan year beginning January 1, 2005 and ending December 31, 2005 were \$7,606.

YOUR RIGHTS TO ADDITIONAL INFORMATION

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the office of the Plan Sponsor

P. H. Glatfelter Company
Plan Sponsor
96 South George Street
York, PA 17401-1434
23-0628360 (Employer Identification Number)
717-225-4711

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of

that report. These portions of the report are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan:

P. H. Glatfelter Company
96 South George Street
York, PA 17401-1434

and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: U.S. Department of Labor, Employee Benefits Security Administration, Public Disclosure Room, 200 Constitution Avenue, NW, Suite N-1513, Washington, D.C. 20210.