

Information submitted via Top Hat Plan Statement Online Filing System to U. S.  
Department of Labor under 29 CFR 2520.104-23

Date Completed: 8/13/2022 10:55 AM EST

Confirmation Number: 10274

Amended Confirmation Number:

Employer Information

Name: Medix Staffing Solutions, Inc.  
Address: 222 S. Riverside Plaza, Ste. 2120  
City: Chicago  
State: IL  
Zip Code: 60606

Plan Administrator Information

Name: Brian Anstiss  
Address: 222 S. Riverside Plaza, Ste. 2120  
City: Chicago  
State: IL  
Zip Code: 60606  
Phone: 3124875870  
Email: banstiss@medixteam.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name:	Medix Long-Term Incentive Plan	Number of Employees: 223
------	------------	--------------------------------	-----------------------------

Additional Information:

The plan is maintained primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.



U. S. Department of Labor  
Employee Benefits Security Administration  
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 10274. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.