

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

Date Completed: 11/15/2022 10:19 AM EST

Confirmation Number: 10650

Amended Confirmation Number:

Employer Information

Name: Southeast Alabama Rural Health Associates  
Address: 1414 Elba Highway  
City: Troy  
State: AL  
Zip Code: 36079

Plan Administrator Information

Name: Pamylon Bowers  
Address: 1414 Elba Highway  
City: Troy  
State: AL  
Zip Code: 36079  
Phone: 3346706726  
Email: pbowers@sarhaonline.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:	Southeast Alabama Rural Health Associates 2022 457(f) Deferred Compensation Plan	Number of Employees: 1
------	------------	---	---------------------------

Additional Information:

Southeast Alabama Rural Health Associates ("SARHA") established a employee benefit plan to be known as Southeast Alabama Rural Health Associates 2022 457(f) Deferred Compensation Plan ("Plan"), which is designed to provide Pamylon G. Bowers of SARHA with deferred compensation benefits in recognition of her dedicated and valuable service to SARHA. The effective date of the plan is November 1, 2022 and the deferred vesting date is December 31, 2027 in the deferred compensation amount of \$300,000.



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 10650. 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.