

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

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Confirmation Number: 11338

Amended Confirmation Number:

Employer Information

Name: Vecchio & Vecchio, D.D.S., Inc.
Address: 1288 Abbe Rd N Ste. C
City: Elyria
State: OH
Zip Code: 44035

Plan Administrator Information

Name: Vecchio & Vecchio, D.D.S., Inc.
Address: 1288 Abbe Rd N Ste. C
City: Elyria
State: OH
Zip Code: 44035
Phone: 4403659580
Email: paulvecchio@gmail.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:	Number of Employees: 1
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Additional Information:

The corporation is a corporation organized under the laws of the state of Ohio. Andrew Schafer, D.M.D., is a key employee, and is the only key employee who has entered into a deferred compensation agreement under which he or designated beneficiary may be paid a benefit upon certain events through the funds of an insurance policy.



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 11338. 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.