

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

Date Completed: 1/15/2015 3:12 PM EST

Confirmation Number: 114

Amended Confirmation Number:

**Employer Information**

Name: Sewickley Savings Bank  
Address: 531 Broad Street  
City: Sewickley State: PA Zip Code: 15143

**Plan Administrator Information**

Name: Michael Swaney  
Address: 531 Broad Street  
City: Sewickley State: PA Zip Code: 15143  
Phone: 4127415000  
Email: mswaney@sewickleysavingsbank.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:	Sewickley Savings Bank SERP	Number of Employees: 3
ID:2	Plan Name:	Sewickley Savings Bank DBO	Number of Employees: 1
ID:3	Plan Name:	Sewickely Savings Bank SD	Number of Employees: 2

**Additional Information:**



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 114. 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.