

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

Date Completed: 1/8/2024 2:42 PM EST

Confirmation Number: 12553

Amended Confirmation Number:

Employer Information

Name: Volos Auto Supply, Inc  
Address: 5090 Commercial Drive  
City: Yorkville  
State: NY  
Zip Code: 13495

Plan Administrator Information

Name: Volos Auto Supply, Inc  
Address: 5090 Commercial Drive  
City: Yorkville  
State: NY  
Zip Code: 13495  
Phone: 3152721778  
Email: aaronsmith@volosautosupply.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:	Non-Qualified Deferred Compensation Plan	Number of Employees: 3
------	------------	--	---------------------------

Additional Information:

The name of the Plan: Volos Auto Supply, Inc Non-Qualified Deferred Compensation  
Plan Coverage: key management personnel



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 12553. 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.