

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: 12965  
Amended Confirmation Number: 12963

Employer Information

Name: Capital District Physicians' Health Plan Inc.  
Address: 500 Patroon Creek Blvd  
City: Albany  
State: NY  
Zip Code: 12206

Plan Administrator Information

Name: Capital District Physicians' Health Plan Inc.  
Address: 500 Patroon Creek Blvd  
City: Albany  
State: NY  
Zip Code: 12206  
Phone: 5186415623  
Email: lori.cammett@cdphp.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:	The Executive 457(b) Retirement Plan of the Capital District Physicians' Health Plan, Inc.	Number of Employees: 60
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Additional Information:

Plan Name correction (misspelling) only : The Executive 457(b) Retirement Plan of the Capital District Physicians' Health Plan, Inc.



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 12965. 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.