

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

Date Completed: 1/16/2025 3:59 PM EST

Confirmation Number: 14348
Amended Confirmation Number: 14347

Employer Information

Name: Embassy National Bank
Address: 1817 North Brown Road
City: Lawrenceville
State: GA
Zip Code: 30043

Plan Administrator Information

Name: Embassy National Bank
Address: 1817 N Brown Road
City: Lawrenceville
State: GA
Zip Code: 30043
Phone: 7705001248
Email: jmclaurin@embassynationalbank.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:	Nitin Shah	Number of Employees: 1
ID:2	Plan Name:	Brad Day	Number of Employees: 1
ID:3	Plan Name:	Greg Brogan	Number of Employees: 1
ID:4	Plan Name:	Joshua McLaurin	Number of Employees: 1
ID:5	Plan Name:	Tyler Phillips	Number of Employees: 1

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 14348. 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.