

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: 14909

Amended Confirmation Number:

Employer Information

Name: TRAFFIX USA Inc.
Address: 141 W. Jackson Blvd , Suite 2010
City: Chicago
State: IL
Zip Code: 60604

Plan Administrator Information

Name: Dilanthi De Alwis-Mummert
Address: 141 W. Jackson Blvd , Suite 2010
City: Chicago
State: IL
Zip Code: 60604
Phone: 6784288375
Email: ddealwis@traffix.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:	TRAFFIX USA Deferred Compensation Plan	Number of Employees: 42
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Additional Information:

The above is an estimate.



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 14909. 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.