

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

Date Completed: 12/5/2025 4:30 PM EST

Confirmation Number: 15749  
Amended Confirmation Number:

Employer Information

Name: Rehabilitation and Employment Services of the East Bay, Inc.  
Address: 704 MAIN STREET  
City: MARTINEZ  
State: CA  
Zip Code: 94553

Plan Administrator Information

Name: IAN G BREMNER  
Address: 704 MAIN STREET  
City: MARTINEZ  
State: CA  
Zip Code: 94553  
Phone: 9252121516  
Email: ian.bremner@ressuccess.org

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:	827506	Number of Employees: 1
ID:2	Plan Name:	827546	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 15749. 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.