

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: 1886

Amended Confirmation Number:

Employer Information

Name: Maynard, Cooper & Gale, P.C.
Address: 1901 6th Avenue North, Suite 2400
City: Birmingham State: AL Zip Code: 35203

Plan Administrator Information

Name: Maynard, Cooper & Gale, P.C. (Executive Committee)
Address: 1901 6th Avenue North, Suite 2400
City: Birmingham State: AL Zip Code: 35203
Phone:
Email: bbeaube@maynardcooper.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:	Supplemental Nonqualified Retirement Benefits Agreement for A. Bullock	Number of Employees: 1
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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 1886. 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.