

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

Date Completed: 6/16/2017 1:43 PM EST

Confirmation Number: 2647

Amended Confirmation Number:

Employer Information

Name: Fairchild Equipment
Address: 2140 Hutson Rd
City: Green Bay State: WI Zip Code: 54303

Plan Administrator Information

Name: Principle Financial Group
Address: 10200 Innovation Dr. Ste 800
City: Milwaukee State: WI Zip Code: 53226
Phone: 4142586220
Email: buehrle.daniel@principle.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: CVC 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 2647. 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.