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

Date Completed: 7/6/2017 11:05 PM EST

Confirmation Number: 2699
Amended Confirmation Number:

Employer Information

Name:	Mobile Area Chamber of Commerce				
Address:	P.O. Box 2187				
City:	Mobile	State:	AL	Zip Code:	36652

Plan Administrator Information

Name:	Matthew Hariel				
Address:	P.O. Box 2187				
City:	Mobile	State:	AL	Zip Code:	36652
Phone:	2514318625				
Email:	mhariel@mobilechamber.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:	Mobile Area Chamber of Commerce 457(F)	Number of Employees: 40

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 2699. 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.