

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: 565

Amended Confirmation Number:

Employer Information

Name: HAR-CO Credit Union
Address: 30 N. Hickory Avenue
City: Bel Air State: MD Zip Code: 21014

Plan Administrator Information

Name: HAR-CO Credit Union
Address: 30 N. Hickory Avenue
City: Bel Air State: MD Zip Code: 21014
Phone: 4108389090
Email: jimm@harcocu.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:	Change of Control Agreement	Number of Employees: 1
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Additional Information:

Note: This plan is a Change of Control Agreement offered by the employer to its President/CEO, James J. Meehan. The plan's purpose is to provide him with financial protection in the event of a change of control as a means of inducing him to remain in the employ of the credit union until the time that such an event might occur.



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 565. 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.