

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: 616

Amended Confirmation Number:

Employer Information

Name: Jonah Bank of Wyoming
Address: 3730 East Second Street
City: Casper State: WY Zip Code: 82609

Plan Administrator Information

Name: Jonah Bank of Wyoming
Address: 3730 East Second Street
City: Casper State: WY Zip Code: 82609
Phone: 3072687346
Email: kdevore@jonahbank.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: Number of Employees: 3

Additional Information:

The number of employees covered by the plan referred to, above, is three (3). The employer will provide plan documents to the Secretary of Labor upon request as required by 104(a)(1) of ERISA.



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 616. 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.