

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

Date Completed: 11/20/2015 10:37 AM EST

Confirmation Number: 717  
Amended Confirmation Number: 716

Employer Information

Name: Direct Fulfillment, LLC  
Address: 5 Mcleland Road  
City: St. Cloud State: MN Zip Code: 56303

Plan Administrator Information

Name: Direct Fulfillment, LLC  
Address: 5 Mcleland Road  
City: St. Cloud State: MN Zip Code: 56303  
Phone:  
Email: cbaldwin@direct-fulfillment.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: Direct Fulfillment, LLC Nonqualified Retirement Plan Number of Employees: 2

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 717. 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.