

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: 7279

Amended Confirmation Number:

Employer Information

Name: Pace Supply Corp.
Address: 6000 State Farm Drive, Suite 200
City: Rohnert Park
State: CA
Zip Code: 94928

Plan Administrator Information

Name: Pace Supply Corp.
Address: 6000 State Farm Drive, Suite 200
City: Rohnert Park
State: CA
Zip Code: 94928
Phone: 9163575660
Email: kwr@seethebenefits.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: 1
ID:2	Plan Name:	Number of Employees: 1

Additional Information:

This electronic filing is being made by an attorney: Kenneth W. Ruthenberg, Jr.,
Employee Benefits Law Group, 620 Coolidge Drive, Suite 100, Folsom, CA 95630.
Please contact him at either kwr@seethebenefits.com or 916-357-5660 if you need
any 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 7279. 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.