

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

Date Completed: 1/14/2016 11:48 AM EST

Confirmation Number: 934

Amended Confirmation Number:

Employer Information

Name: The Center for Orthopedic Research and Excellence

Address: 18444 N. 25th Ave,

City: Phoenix State: AZ Zip Code: 85023

Plan Administrator Information

Name: Randall Currier

Address: 18444 N. 25th Ave,

City: Phoenix State: AZ Zip Code: 85023

Phone: 6232418747

Email: randall.currier@thecoreinstitute.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: CORE Institute Deferred Compensation Plan Number of Employees: 170

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 934. 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.