

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

Date Completed: 3/18/2022 4:56 PM EST

Confirmation Number: 9579

Amended Confirmation Number:

Employer Information

Name: UniFirst Corporation  
Address: 68 Jonspin Road  
City: Wilmington  
State: MA  
Zip Code: 01887

Plan Administrator Information

Name: Ryan OShea on behalf of the Compensation Committee of the Board of Directors of  
UniFirst Corporation  
Address: 68 Jonspin Road  
City: Wilmington  
State: MA  
Zip Code: 01887  
Phone: 9785274203  
Email: ryan\_oshea@unifirst.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:	UniFirst Corporation Deferred Compensation Plan	Number of Employees: 30
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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 9579. 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.