



**YOUR BENEFITS AT A GLANCE  
CALIFORNIA**

2010

<b>PLAN</b>	<b>ELIGIBILITY</b>	<b>COST</b>	<b>BENEFITS</b>
HEALTH PLAN	91st day of full employment. Dependents can be added at that time or during open enrollment, unless there is a "qualifying event"	Bi-weekly: Employee only: -0- Employee plus one dependent: \$51.63 Employee plus two or three dependents: \$73.11 Employee plus four or more dependents: \$75.30	After the deductible of \$200 per person or \$500 per family has been met, the Plan will pay 80% of eligible expenses up to \$1million lifetime limit. There is an out-of-pocket annual maximum of \$3,500 per person, or \$7,000 per family (excludes dental, vision, and prescription). Once your maximum has been exceeded in a calendar year, the Plan will pay 100% of the remaining eligible expenses.
HOSPITALIZATION PPO Only	91st day of full employment	Included in Health Premium	In-Patient: 80% of covered expenses. <b>Blue Cross pre-approval is required.</b> Blue Cross network PPO hospital must be used. The Plan will not pay greater than the PPO rate for hospitalization, diagnostic testing, or surgery.
DENTAL PLAN Any Dentist	91st day of full employment (for limited basic services)	Included in Health Premium	<b>There is a twelve month waiting period for most services.</b> During the first 12 months of coverage, you are eligible only for a routine exam, and routine cleaning. After the individual deductible of \$50.00 has been met, the Plan will pay 80% for covered services up to \$1,500 per person, or \$3,000 per family in a calendar year.
VISION PLAN Any Optometrist	91st day of full employment	Included in Health Premium	There is no deductible in the Vision Plan. The Plan will pay up to \$60.00 for an eye exam every 12 months, up to \$90.00 for lenses every 12 months, and up to \$75.00 for frames every 24 months.
PRESCRIPTION	91st day of full employment	Included in Health Premium	30% Co-payment for all prescriptions. Maximum of \$300 on a single RX
VOLUNTARY BENEFITS	91st day of full employment	Varies, dependent upon Plan(s)	Plans available are: Disability Insurance, Life Insurance, Accident Insurance, Cancer Insurance, Critical Illness Insurance and Hospital Confinement Insurance
SECTION 125 FLEXIBLE SPENDING PLAN (FSA)	One year of employment	Administrative costs \$0 biweekly. for Medical Premium Only \$2.31 biweekly for all other FSA Premiums	Contributions are made voluntarily by employees on a pre-taxed basis for Medical Premiums, Out-of-pocket Medical Expenses and Dependent Care.
LONG TERM DISABILITY  AD&D	First day of the month following 1 year of employment	Fully paid by the Company	Pays 60% of monthly salary up to a maximum payment of \$10,000 per month after an elimination period of 90 days.  Pays 1 times the employee's annual salary up to a maximum of \$150,000.
DEATH BENEFIT	First day of the month following 90 days of employment	Fully paid by the Company	Equal to 2 times the employee's annual salary up to \$50,000 maximum coverage.
401(K) RETIREMENT PLAN  COMPANY MATCH	91 <sup>st</sup> day of full employment  One year of employment	Fees: \$1.50 per Quarter	Contributions are made voluntarily by employees up to 25% of eligible pay.  The Company will match dollar for dollar, the first 6% of employee contributions per pay period.
SICK LEAVE	91 <sup>st</sup> day of full employment (All full-time employees)	Fully paid by the Company	Sick leave credits are accrued from the date of employment at the rate of 1.73 hours biweekly up to maximum of 44.98 hours per calendar year.
BEREAVEMENT LEAVE	All full-time employees	Fully paid by the Company	Leave of three to five days given for immediate family members. Length of leave determined by travel time and responsibility for decedent.
EMPLOYMENT REFERRALS	For employees in positions below that of an Assistant Manager	Fully paid by the Company	Once the person you have referred has been employed for 6 months, you will receive \$250, and after the person has been employed for 1 year, you will receive an additional \$250.
HOLIDAYS	All full-time employees	Fully paid by the Company	All full-time employees will be compensated at their regular base pay for the holidays as designated by the annual update to the personnel manual plus one personal holiday.
VACATION	91 <sup>st</sup> day of full employment (All full-time employees)  After 5 years of continuous employment After 10 years of continuous employment	Fully paid by the Company	3.47 hours biweekly for each month of continuous employment during the first 5 years of employment Those in positions of assistant manager or above accrue at the rate of 4.33 hours biweekly 5.20 hours biweekly 6.93 hours biweekly
JURY DUTY	All full-time employees	Fully paid by the Company	Up to 5 days pay equal to your regular salary from company while serving on jury duty.
EDUCATIONAL ASSISTANCE PLAN	91 <sup>st</sup> day of full employment (All full-time employees)	Fully paid by the Company	Wide range of job related programs available. Minimum grade standards must be met. Expenses reimbursed upon successful completion.

**STATEMENT REGARDING BENEFIT PROGRAMS**

The company has established a number of employee benefit programs for its eligible employees. Although this Benefits at a Glance document does not restate all of the features of these benefit programs, it provides brief summaries to acquaint employees with some of the key features of the programs. It is important that employees remember that additional terms conditions and limitations regarding program eligibility and benefit entitlement often exist. Official plan documents should be consulted for further information regarding each benefit program. In case of an actual or apparent conflict between the benefit summaries set forth in the Benefits at a Glance document and the terms of the official plan documents, the provisions of the official plan documents, as interpreted in the sole and absolute discretion of the plan administrator, shall control.

In addition, while it is the company's present intention to continue these benefits, the company reserves the right, whether in an individual case or more generally, to modify, curtail, reduce or eliminate any benefit, in whole or in part, either with or without notice. Finally, neither the benefit programs nor their descriptions are intended to create any guarantee regarding employment or continued employment. Employment relationships are for an indefinite term and are terminable at will, either at the option of the employee or the company.



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EMPLOYEE ASSISTANCE PROGRAM	All employees and their dependents	Fully paid by the Company	Program provides up to 8 sessions at no charge. Fees will apply on additional services and/or treatments.
MONTHLY PARKING	All employees working in the Los Angeles Office	Fully paid by the Company	Company paid monthly parking. Employee is responsible for parking violations.
TRANSPORTATION ALLOWANCE	All employees working in the Los Angeles Office	Fully paid by the Company	\$7.50 biweekly for employee transportation costs for employees not utilizing a parking space.

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