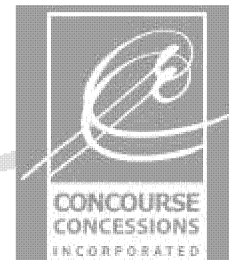


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TOTAL COMPENSATION STATEMENT

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**Bonnie Graham**  
5482 Blanco Way  
Culver City, CA 90230




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CONCOURSE CONCESSIONS TOTAL COMPENSATION STATEMENT

**BENEFIT STATEMENT**

Friday, August 21, 2009

Benefit	Annual Cost	Employer Contribution
Parking @ \$20 PPD	\$480.00	
Vacation Days @ 15 per year	\$2,907.12	
Health Insurance @ \$100.00 PPD	\$2,400.00	
Worker Comp Protection @ \$15.00 PPD	\$360.00	
Group Term Life @ \$2.50 PPD	\$60.00	
Unemployment Insurance @ \$18.00 PPD	\$432.00	
Employer Cafe Voluntary Premium Contribution	\$320.88	
PAID HOLIDAYS @ 6 per year	\$1,162.80	
Sickdays @ 7 per year	\$1,356.72	
Social Security	\$3,033.22	
Medicare	\$709.38	
	<b>Total Cost</b>	<b>\$13,222.12</b>
	Annual Income	\$50,000.00
	<b>Total Compensation</b>	<b>\$63,222.12</b>

Your employer contributes an additional 26.44% of your annual income toward your benefits, which results in your total compensation of \$63,222.12

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This statement is only an overview of your benefits. It is not legally binding, and should not be considered a contract. If you should discover errors in this statement or if you have questions, contact your supervisor or person responsible for your benefits administration.

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