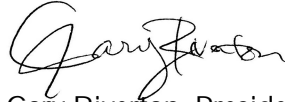


riverton enterprises

Dear Jennifer,

This benefits statement is a brief outline of your company provided benefits. It is our way of showing you how much we appreciate your contribution to the success of the Company. Should you have any questions regarding this report, please do not hesitate to call the Human Resources Department.

Sincerely,



Gary Riverton, President

YOUR PERSONAL SUMMARY

Total Compensation

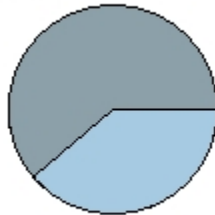
Cash Comp: 76%



Benefits: 24%

Total Benefits Cost

Company: 61%



You: 39%

Cash Compensation

Base Salary	\$45,000.00
Overtime	1,500.00
Christmas Bonus (2004)	1,500.00
401(k) Bonus (2004)	5,000.00
Other Bonus (2004)	400.00

Total Cash Compensation \$53,400.00

Benefits	Your Annual Contribution	Company Annual Contribution
Health Insurance	\$800.00	\$6,000.00
Dental Insurance	80.00	400.00
Vision Insurance	15.00	50.00
Basic Life and AD&D	0.00	1,000.00
Supplemental Life	150.00	0.00
Long Term Disability	0.00	2,500.00
LTD Buy Up	300.00	0.00
YTD 401(k) Contributions	1,200.00	1,200.00
Social Security & Medicare	4,000.00	4,000.00
State & Fed. Unemployment	0.00	256.00
Workers' Compensation	0.00	391.88
Total Benefits Value	\$10,545.00	\$16,797.88
Total Cash Compensation		\$53,400.00
Total Rewards		\$70,197.88

COMPREHENSIVE HEALTH

You have elected to participate in our Comprehensive Health and Welfare Plan. You have elected coverage for your entire family through the Acme Health Plans. Dental benefits are provided through the Del Danno Insurance Company. Vision care benefits are paid up to \$50 for an eye exam every 12 months and up to \$200 for lenses and frames every 24 months.

LIFE and AD&D

Life and AD&D insurance coverage provides financial protection for you and your family in the event of an accident or death. All eligible employees are covered by basic life and AD&D insurance, paid by the Company, with a benefit equal to three times (3x) your annual earnings up to a maximum of \$1,000,000. The value of your basic life insurance is: \$100,000. The value of your AD&D benefit is: \$120,000.

The Company offers additional life insurance coverage for you, your spouse and/or dependents, at your cost. You are currently enrolled in the following supplemental life insurance program(s):

Employee Life value: \$100,000.00 Spouse Life value: \$25,000.00 Dependent Life value: \$10,000.00

SHORT-TERM DISABILITY and LONG-TERM DISABILITY

Short-Term Disability (STD) salary continuation, paid by the Company, is provided to all employees after three (3) months of service. The current maximum value of your total STD payments is approximately \$20,000.00. Long-Term Disability (LTD) benefits are available at 60% of your monthly earnings up to a maximum of \$15,000 per month. The current value of your monthly LTD payments is \$2,200.00 (including buy up, to a maximum of \$20,000, if applicable).

401(k) PROFIT SHARING and RETIREMENT PLAN

Employees are eligible to participate in the 401(k) plan via salary deduction the first day of the month following 30 days of service and are eligible for the "per pay-period" match after completion of one year of service. The Company's matching contribution to the 401(k) Plan for 2006 is \$1 for every \$1 that an employee contributes to the Plan, up to a maximum of \$2,500. The participant's contributions, and any Company matching contributions, are 100% vested when made. Your current total plan balance, including profit sharing, is \$60,000.00. Your total vested balance is \$75.00.

PAID TIME OFF

Based solely on your length of service you accrue approximately 25 days of PTO annually with an approximate value of \$4,500.00.

OTHER BENEFITS

- | | | | |
|-------------------------------|----------------------|---------------------------|-------------------------|
| ■ Flexible Spending Accounts | ■ On-site Child Care | ■ Discount Ticket Program | ■ Annual Company Picnic |
| ■ Employee Assistance Program | ■ Direct Deposit | ■ Family Medical Leave | ■ Uniform Expense |
| ■ Free Checking at World Bank | ■ Service Awards | ■ Cellular Phone Plan | ■ Free Parking |

ABOUT THIS BENEFIT STATEMENT

Your fringe benefits contribute greatly to your annual compensation and to your personal well being. The purpose of this report is to help you better understand the value of your benefit program. Every effort has been made to accurately communicate your benefits in this report. Please note that errors do occasionally occur. If you should discover any discrepancies in your report, or if you need help in understanding its contents, please contact your supervisor or person responsible for benefit administration.

This report is only a summary. The actual determination of your benefits is based solely on the plan documents provided by the carrier for each plan. This summary report is not legally binding, is not a contract, and it does not alter or amend any original documents. We hope this report will be helpful to you and your family in planning for your financial security.

HOW SOCIAL SECURITY WORKS FOR YOU

Each year you pay a percentage of your earnings into a form of retirement commonly known as Social Security. Your employer matches your contribution. All contributions are paid directly to the Social Security Administration.

The purpose of both contributions is to provide you with a minimal level of income at retirement, or survivor income for your family in the event of your death. In addition, these funds provide a long list of other benefits which are available to you and your family. Your local Social Security Administration office can provide you with a free booklet which describes each of the many benefits and how to obtain them.

Every year the Social Security Administration sends a statement to workers aged 25 and older. It includes a summary of the estimated benefits you and your family may receive as a result of your earnings. The statement gives you the opportunity to see if your account has been properly credited each year. Consult your local Social Security Administration office for details.

UNEMPLOYMENT COMPENSATION COVERAGES

You are covered under Unemployment Compensation coverage which provides you with partial compensation in the event you are laid off from work for reasons other than misconduct. If you leave your employer, you are either not covered, or the period of waiting for benefits is extended.

If you qualify for coverage, your income subsidy will be based on a percentage of your earnings. Contact your state employment office for claims filing information.

WORKERS' COMPENSATION

You are covered with Workers' Compensation Insurance in the event you are injured while working. If your accident results in death, your family will receive survivor's income. This coverage also applies to disability or death caused by a job related disease.

Your employer (in case of self-funding) or your employer's insurance carrier will pay for all reasonable medical expenses related to your accident, disability, or death. Spouses and children will receive a lump sum for burial expenses and may be entitled to additional compensation based on your earnings. Workers' Compensation laws are state laws, not federal laws. As a result, the benefits will vary between states. Consult your State Workers' Compensation department or your employer for claims information.

riverton enterprises

2000 West Riley Lane
New York, NY 10025

Your Personal Statement of Total Compensation



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Jennifer Nelson
111 S.E. 7th Street
New York, NY 10022