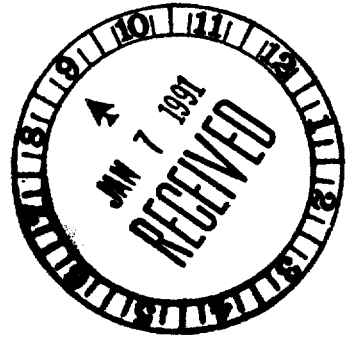


2520040152527

LABOR DEPARTMENT STATEMENT



TO: Office of Pension and Welfare Benefit Programs
Labor Management-Services Administration
U. S. Department of Labor
Washington, D.C. 20216

FROM: Employer: MCGINTY BROS., INC.
Employer Identification Number: 36-2586140
Address: 3524 Long Grove Road
Long Grove, Illinois 60047

Dec. 27, 1990

This document constitutes the statement required by 29 C.F.R. Sec. 2520.104-23(a)(1) to be filed with the Secretary of Labor in respect to Non-qualified Deferred Compensation Plans maintained by the above employer.

The employer currently maintains one Non-qualified Salary Continuation Plan(s) for executives who are members of a select group of management or who are highly compensated.

The number of participants in each plan is as follows:

Plan 1 1

Plan 2 _____

Plan 3 _____

Signed:

Named Fiduciary: CHARLES P. MCGINTY

Title: President of

Employer: MCGINTY BROS., INC.