

SALARY CONTINUATION

FIXED AND FLEXIBLE PREMIUM LIFE INSURANCE

SPECIMEN ERISA MEMORANDUM STATEMENT

DATE: July 1 1995

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

FROM: Corporation: LOGISOURCE, INC.
Employer Identification Number: 62-1523430
Address: P.O. Box 30725, Charlotte, NC 28230

This statement is with respect to Non-Qualified Deferred Compensation Plans maintained by Employers under the requirements of 29 CFR Section 2520.104-23(a).

Employer currently maintains one non-qualified salary continuation plan for Executives who are members of a "select group of management" or who are "highly compensated".

The number of participants are:

Plan 1: 1

Plan Administrator: JAMES A. Lloyd

Title: President

Employer: Logisource, INC.

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(NOTE: If more than one Plan exists, you should so indicate in the second paragraph and list all Plans (Plan 2, Plan 3, etc.) in the third paragraph along with the number of participants in each Plan.)

James A. Lloyd
PRESIDENT

LOCAL 704 599-1395
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Logisource
The Logistics Resource



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