OPEN ROAD AUTO GROUP

Bonus Request Form

| Dealership Name | • | |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Employee Name: | | |
| Month of: | | |
| Pay Date: | | |
| Bonus Base | | |
| | □ Weekly – included in □ Monthly – included in □ Monthly – Per Month □ Other - Discretionary | written pay plan |
| Bonus Type | | |
| | □ Volume/Unit/Sales | |
| | □ Gross | |
| | □ Fast Start | |
| | □ CSI | |
| | □ Other | |
| Amount: | \$ | |
| ** (| Supportive documentation must | t be attached. |
| Signature | | |
| Authorizations: | | |
| Department Man | ager | _ |
| General Manager | | _ |
| Vice President | | _ |

*** Bonus Requests must be submitted by Monday of the pay week. All monthly bonus requests must be submitted by the 2^{nd} of the following month. Payments requested after due date may be denied. All bonuses are taxed on a monthly taxing table. ***

1/11/10