

INFORMATION SECURITY AGREEMENT

For security purposes, authorized individuals may monitor equipment, systems, and network traffic at any time. Elmstone Group Property Management, LLC ("the company") reserves the right to audit all devices and systems (whether company-owned or privately-owned) that may access its resources on a periodic basis to ensure compliance with security policy.

Each user of the company computing and information resources must realize the fundamental importance of information resources and recognize his/her responsibility for the safekeeping of those resources.

_____ I agree to comply fully with all company information security policies.

_____ I understand that I will only be given access to the data and/or systems that are minimally necessary to perform my work (least-privilege) and that this access may be revoked or limited at any time, should I violate information security policies.

_____ I understand that the copying or transmission of the company data, software or custom code onto devices that are not owned by and/or approved by the company is strictly prohibited.

_____ I understand that I am prohibited from connecting or causing to be connected any non company-owned device to the company network or to a company-owned desktop or laptop computer (exceptions made be made for e-mail access only on personal smart phones, subject to approval and prior authorization).

_____ I understand that the use of personally-owned storage devices of any kind (including but not limited to USB drives, cameras, DVD/CD writable media, and portable hard drives) is strictly prohibited. Any such devices required for the performance of an authorized task will be provided by the company.

_____ I understand that I am prohibited from attempting to circumvent the user authentication or security of any host, network, or account on the company network.

_____ I understand that I am prohibited from providing any company-owned information to outside parties without explicit permission from an executive member of the company.

_____ I understand that non-approved wireless access points are not permitted on the company network. If I require wireless access, such access is to be provisioned using approved, internal methods. This includes, but is not limited to: 3G/4G personal "hot- spot" devices, wireless routers, and the use of a smart phone as a wireless hot spot.

I agree upon the end of an engagement (whether as a contractor or employee) not to be in personal possession of any data, software, code or Intellectual Property of the company, its associates, partners, vendors or any of its customers. Any work created while working for or while working at the company and on their time is intellectual property of the company. If any part of this agreement is broken, I may be held legally accountable if any improper dissemination of the company information is identified.

Initials

VIDEO SURVEILLANCE POLICY

Acknowledgement, Consent, and Release

I acknowledge that I have received a copy of Elmstone Group Property Management (EGPM) (EGPM) Company's updated policies, that I have been given the opportunity to read and ask any questions that I might have about the same, and that by signing this acknowledgement, I agree to adhere to the policies as a condition of my employment and/or continuing employment with EGPM. I understand and agree that in acknowledging and signing this form, no contract of employment is hereby created, and further understand that no promise or guarantee of employment for any particular term is hereby made. I also acknowledge that I am an employee-at-will and that either I or EGPM may end the employment relationship at any time, with or without notice or cause. I further acknowledge that my failure to adhere to these policies may subject me to disciplinary action, up to and possibly including immediate termination without warning.

In accordance with EGPM's policy regarding searches, I understand that all desks, storage areas, lockers, and all vehicles owned, financed, or leased by EGPM or used by EGPM to transport employees, goods, and/or products are subject to search at any time without my knowledge, presence, or permission. With the exception of my personal vehicle, I understand I am prohibited from locking or otherwise securing any such desk, storage area, locker, or vehicle with any lock or locking device not supplied or approved by EGPM. If I use my own lock on any such item, I agree to give my supervisor a copy of the key or combination to the lock so that the company may open the lock at any time that it may deem such action necessary. In the event that a search of my personal vehicle becomes necessary, I agree to allow personnel designated by EGPM to conduct such a search at any time the company may direct during my duty shift.

I further understand that in order to promote the safety of employees and company visitors, as well as the security of its facilities, EGPM may conduct video surveillance of any portion of its premises at any time, the only exception being private areas of restrooms, showers, and dressing rooms, and that video cameras will be positioned in appropriate places within and around EGPM buildings and used in order to help promote the safety and security of people and property. I hereby give my consent to such video surveillance at any time the company may choose.

I hereby release EGPM from all liability, including liability for negligence, associated with the enforcement of these policies and/or any searches or surveillance undertaken pursuant to these policies.

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EMPLOYEE AGREEMENT AND CONSENT TO DRUG AND/OR ALCOHOL TESTING

I hereby agree, upon a request made under the drug/alcohol testing policy of Elmstone Group Property Management, LLC (the Company), to submit to a drug or alcohol test and to furnish a sample of my urine, breath, and/or blood for analysis. I understand and agree that if I at any time refuse to submit to a drug or alcohol test under company policy, or if I otherwise fail to cooperate with the testing procedures, I will be subject to immediate termination. I further authorize and give full permission to have the Company and/or its company physician send the specimen or specimens so collected to a laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to the Company and/or to any governmental entity involved in a legal proceeding or investigation connected with the test. Finally, I authorize the Company to disclose any documentation relating to such test to any governmental entity involved in a legal proceeding or investigation connected with the test.

I understand that only duly-authorized Company officers, employees, and agents will have access to information furnished or obtained in connection with the test; that they will maintain and protect the confidentiality of such information to the greatest extent possible; and that they will share such information only to the extent necessary to make employment decisions and to respond to inquiries or notices from government entities.

I will hold harmless the Company, its company physician, and any testing laboratory the Company might use, meaning that I will not sue or hold responsible such parties for any alleged harm to me that might result from such testing, including loss of employment or any other kind of adverse job action that might arise as a result of the drug or alcohol test, even if a Company or laboratory representative makes an error in the administration or analysis of the test or the reporting of the results. I will further hold harmless the Company, its company physician, and any testing laboratory the Company might use for any alleged harm to me that might result from the release or use of information or documentation relating to the drug or alcohol test, as long as the release or use of the information is within the scope of this policy and the procedures as explained in the paragraph above.

This policy and authorization have been explained to me in a language I understand, and I have been told that if I have any questions about the test or the policy, they will be answered.

I UNDERSTAND THAT THE COMPANY WILL REQUIRE A DRUG SCREEN AND/OR ALCOHOL TEST UNDER THIS POLICY WHENEVER I AM INVOLVED IN AN ON-THE-JOB ACCIDENT OR INJURY UNDER CIRCUMSTANCES THAT SUGGEST POSSIBLE INVOLVEMENT OR INFLUENCE OF DRUGS OR ALCOHOL IN THE ACCIDENT OR INJURY EVENT, AND I AGREE TO SUBMIT TO ANY SUCH TEST.

Initials

Policy Regarding Use of Company-Issued Credit Cards

The Company will issue company credit cards to certain employees for use in their jobs; this policy sets out the acceptable and unacceptable uses of such credit cards. Use of company-issued credit cards is a privilege, which the Company may withdraw in the event of serious or repeated abuse. Any credit card the Company issues to an employee must be used for business purposes only, in conjunction with the employee's job duties. Employees with such credit cards shall not use them for any non-business, non-essential purpose, i.e., for any personal purchase or any other transaction that is not authorized or needed to carry out their duties. Employees must pay for personal purchases (i.e., transactions for the benefit of anyone or anything other than the Company) with their own funds or personal credit cards. The Company will not regard expenses for one's own business-related use, such as lodging and meals while on company-approved business trips, as personal purchases, as long as such expenses are consistent with the Company's travel and expense reimbursement policy. If any employee uses a company credit card for personal purchases in violation of this policy, the cost of such purchase(s) will be considered an advance of future wages payable to that employee, and will be recovered in full from the employee's next paycheck; any balance remaining will be deducted in full from subsequent paychecks until the wage advance is fully repaid. Such deductions may take the employee's pay below minimum wage for the pay period(s) in question. If an employee uses a company credit card for any other type of unauthorized transaction in violation of this policy, i.e., incurs financial liability on the Company's part that is not within the scope of the employee's duties or the employee's authorization to make business-related purchases, the cost of such purchase(s) or transaction will be the financial responsibility of that employee, and the employee will be expected to reimburse the Company via deductions from pay until the unauthorized amount is fully repaid. Such deductions will be in the amount of the unauthorized purchase(s), but if a deduction for such amount would take the employee below minimum wage for the work week in question, the deductions will be in two or more equal increments that will not take the employee's pay below minimum wage for any workweek involved. In addition to financial responsibility and liability for wage deductions, any purchases an employee makes with a company credit card in violation of this policy will result in disciplinary action, up to and possibly including termination of employment, depending upon the severity and repeat nature of the offense.

Initials

**Agreement for Wage Deductions Associated with Improper Use of Company-Issued
Credit Cards**

I, _____, hereby certify that I understand and agree to abide by the Company's policy regarding use of company-issued credit cards, a copy of which I have received, and which has been explained to me. I agree that if I make any personal purchases (i.e., transactions for the benefit of anyone or anything other than the Company) in violation of that policy, the amount of such purchases is an advance of future wages payable to me, that the Company may deduct that amount from my next paycheck, and that if there is a balance remaining after such deduction, the Company may deduct the balance of the wage advance from my future paychecks until the amount is repaid in full. I further agree that if I make any non-personal transactions in violation of the policy in question, i.e., incur financial liability on the Company's part that is not within the scope of my duties or my authorization to make business-related purchases, I am financially responsible for any such expenses and agree to reimburse the Company via wage deductions for such amounts until the unauthorized amounts are fully repaid. Such deductions will be in the amount of the unauthorized purchase(s), but if such amount would take my pay below minimum wage for the work week in question, the deductions will be in two or more equal increments that will not take my pay below minimum wage for any workweek involved.

Initials

By signing this page below I acknowledge receipt and approval of the previous pages initialed by me. They include:

1. Information Security Agreement
2. Video Surveillance Policy
3. Employee Agreement and Consent to Drug and/or Alcohol Testing
4. Policy Regarding Use of Company-Issued Credit Cards
5. Agreement for Wage Deductions Associated with Improper Use of Company-Issued Credit Cards

Signature of Employee	Date
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Employee's Name - Printed

Company Representative	Date
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Title

Elmstone Group Property Management, LLC