



The Employers Council's fourteenth annual *2008-2009 Executive Compensation Survey* is now available. This report consists of the average salaries and bonuses for 15 executive positions. The data was collected from Utah employers in October 2008. Information is reported by industry type, employment size, gross sales volume, years in position and (for the two top executive positions) percentage of stock owned. Executive perquisites data is also included.

The executive positions and perquisites surveyed include:

Executive Positions

Chief Executive Officer
Chief Operating Officer
Chief Financial/Accounting Officer
Chief Operations Executive (Mfg.)
Chief Operations Executive (Non-mfg.)
Chief Administrative Executive
Chief Research & Development Executive
Chief Engineering Executive

Chief Data Processing/Info. Systems Exec.
Chief Human Resource Executive
Chief Quality Control Executive
Chief Sales Executive
Chief Marketing Executive (Excluding Sales)
Chief General Executive
Chief International Executive

Perquisites

Deferred Compensation
Stock Options
Automobile
Financial Services
Legal Services
Physical Examinations
Outplacement Services
Club Membership
Electronic Equipment

Due to the confidentiality of the data, this survey can only be sent to the attention of an executive officer of your company.

Direct questions about ordering the survey to Terri Whitehouse. Please fill out the form below to place your order for the *2008-2009 Executive Compensation Survey*.

Number Ordered	Survey	Member Price <input type="checkbox"/>	Non-Member Price <input type="checkbox"/>
	<i>2008-2009 Executive Compensation Survey</i>	\$159+10.81 tax = \$169.81	\$315+21.42 tax = \$336.42

How would you like to receive the survey?	Electronic Format <input type="checkbox"/> Email address: _____	Paper Format <input type="checkbox"/>
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***We offer a significant discount to participating firms.
If your firm participated, contact the Council office for participant price.***

Recipient Name: _____ Title: _____
 Company Name: _____ Phone: _____ Fax: _____
 Mailing Address: _____ City/St/Zip: _____
 Check Enclosed ____ Invoice Company ____ (members only)
 Charge Credit Card: Master Card ____ Visa ____ American Express ____
 Credit Card Number: _____ Expiration Date: _____ Total \$ _____
 Name on Card: _____ Signature: _____

Return order form to: The Employers Council