

Exhibit 1

DESCRIPTION OF THE Sherwood Management Co., Inc. HEALTH REIMBURSEMENT ARRANGEMENT

Plan Information	
Company Name	Sherwood Management Co., Inc.
State of Legal Domicile	California
HRA Effective Date	04/01/2012
Plan Name	Sherwood Management Co., Inc. Health Reimbursement Arrangement
Plan Number	412
Privacy Official	Art Ronci
Plan Year	The twelve-month period commencing each December 1 and ending on the subsequent November 30, except in the case of a short plan year representing the initial Plan Year or where the Plan Year is changed, in which case the Plan Year shall be the entire short plan year.

Timing For Submitting Claims and Receiving Reimbursements	
Active Employees	<p>Claims and documentation must be submitted within 180 days of the date of service</p> <p>However, claims and documentation for dates of service in prior Plan Year must be submitted within 90 days of the close of prior Plan Year</p>
Terminated employees	<p>Claims and documentation must be submitted within 90 days from the date of termination.</p> <p>Only claims with dates of service up to and including the date of termination may be eligible for reimbursement.</p>
Timeframe for reimbursements	The Plan Administrator must reimburse approved claims within 90 days of the date claims are approved by the Plan Administrator, provided sufficient funds exist in the Participant HRA Account.
Minimum Reimbursement	Reimbursement may not be made for approved claims until the aggregate amount to be reimbursed exceeds \$10.00, except for the final reimbursement claim for a Period of Coverage.