

# Total Fringe Benefits Summary

**Start Date:** 10/01/2004      **End Date:** 10/31/2004

**Project:** Project Description

<b>Employee ID</b>	<b>Employee Name</b>	<b>RT Hrs</b>	<b>OT Hrs</b>	<b>ST Hrs</b>	<b>Total Amount</b>
Test 1	Test Employee 1	104.00	0.00	0.00	\$624.00
Test 4	Test Employee 4	39.00	3.00	0.00	\$484.68
<b>Grand Totals:</b>		143.00	3.00	0.00	\$1,108.68