Fringe Benefit Disclosure Form

Fringe Benefits are Paid to Approved Plans, Funds, or Programs

In addition to the basic rates paid to each laborer or mechanic on the payroll, payments have been or will be made to appropriate programs for the benefit of the employees as shown in the following chart below. If fringe benefits amounts paid are the same for all employees, you may list the amount of each such identical fringe payments only once in the appropriate column; if the fringe benefit amounts vary by employee, list each employee's name and set out the amounts paid on behalf of each employee for each fringe benefit.

Employee Name	Health and Welfare ($/hr)	Pension ($/hr)	Vacation ($/hr)	Holiday ($/hr)	Apprent-ice Training ($/hr)	Other C ($/hr)	Other D ($/hr)	Total ($/hr)	If "other deduction" or fringes, please explain (indicate other A,B ,C or D)	Identify by name, the plan, fund, or programs to which fringe benefits are paid (Indicate H&W, Pension, etc.)