

ep CREW TIME CARD

PICTURE	PROD #	GUAR. HOURS	RATE	WEEK ENDING
NAME	SOCIAL SECURITY # XXX-XX-	JOB CLASSIFICATION/OCC. CODE		ACCOUNT #
LOAN-OUT	FEDERAL I.D. #	LOCATION FOREIGN _____		

WORK		MEAL 1		MEAL 2		RE-RATE	OCC. CODE	TOTAL HRS.	1X	1.5X	2X	MEAL PNLTY	ACCT	RATE	TYPE	HRS	TOTAL
STATE	CITY	ACCT. CODE	DATE	LOC	DAY	CALL	OUT	IN	OUT	IN	WRAP						
					1ST												1X
					2ND												1.5X
					3RD												2X
					4TH												
					5TH												
					6TH												
					7TH												
Layoff/Termination Date: / /						TOTAL HOURS											MP

TOTAL AMOUNT

COMMENTS: _____

ACCT. #	MEALS-ALLOW. 861	MEALS-TAX 860	PER DIEM ADV. D18	ACCT. #	LODGING-ALLOW. 861	LODGING-TAX 860	PER DIEM ADV. D18	ACCT. #	MEAL MONEY-TAX 867	
ACCT. #	BOX RENTAL 853	ACCT. #	CAR ALLOW. 856	ACCT. #	MILEAGE-ALLOW. 852	MILEAGE-TAX. 858	MILEAGE ADV. D20	ACCT. #	2ND CAMERA 680	
***CANADIAN SHOWS - PLEASE SUPPLY ALLOWABLE AND TAXABLE CN PER DIEM IN U.S. \$ AND CONV. RATE				PER DIEM BASED ON: _____ DAYS @ _____ U.S. \$ PER DAY			CN DIEM-ALLOW. 861	CN DIEM-TAX. 860	ACCT. #	SALARY ADVANCE D21
ACCT. #	HAZARD 653	ACCT. #		ACCT. #				ACCT. #		

IN SIGNING BELOW, THE EMPLOYEE/LOAN-OUT AND SUPERVISOR/PRODUCTION APPROVER EACH CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT AND COMPLETE.

EMPLOYEE/LOAN-OUT SIGNATURE X _____

APPROVED X _____