

NAME: \_\_\_\_\_ PRODUCTION COMPANY: \_\_\_\_\_ WEEK ENDING: \_\_\_\_\_  
 SSN: \_\_\_\_\_ PRODUCTION TITLE: \_\_\_\_\_

OCCUPATION : \_\_\_\_\_ OCCUPATION CODE: \_\_\_\_\_

RATE: \$ \_\_\_\_\_ PER  HOUR  DAY  WEEK

GUARANTEED HOURS: \_\_\_\_\_ PER  DAY  WEEK

Union  
 Non-Union

WORKED AT:  
 Studio  
 Nearby Bus to  
 Nearby Drive to  
 Distant (Overnight) Location

COMMENTS: \_\_\_\_\_

**FOR PAYROLL USE ONLY**

**FOR PAYROLL USE ONLY**

DAY	DATE	CALL TIME	1ST MEAL		2ND MEAL		WRAP TIME	STRAIGHT TIME	1.5 X	2 X	OTHER	TOTAL
			OUT	IN	OUT	IN						
S												
M												
T												
W												
T												
F												
S												
<b>TOTAL</b>												

PAY CODE	HRS	RATE	AMOUNT
ST			
1.5 X			
2X			

REIMBURSEMENT - MISC ACCOUNT #		BOX RENTAL ACCOUNT #		MILEAGE ACCOUNT #	
TAXABLE	NON-TAXABLE	TAXABLE	NON-TAXABLE	TAXABLE	NON-TAXABLE
\$	\$	\$	\$	\$	\$

DEDUCTIONS:			
CODE	DESCRIPTION	AMOUNT	ACCOUNT#

Did you have a work related injury?  Yes  No

EMPLOYEE SIGNATURE **X**

APPROVED **X**



Los Angeles  
 (818) 848-9200

New York  
 (212) 675-4600

Production Company and Employee acknowledge by signing this Time Card that if no hours are listed only the guaranteed hours or eight hours per day will be recorded as worked.

# Employee Timecard

(Not for Independent Contractors)