CAPS A Cast & Crew Company		5th Floo	, CA 91504	1560 Br Suite 70 New Yo (818) 84	01 rk, NY 100	36 <b>/</b>	ACTORS WEEKLY TIME SHEET Employer: New C.A.P.S., LLC, FEIN: 27-4217142													WORK STATUS SW START WORK SWF START WORK FINISH		
ARTIST NAM	E			SOCIAL SECURITY #											\	WEEK ENDING					T WOR K	K TRAVEL
LOAN OUT C	OMPANY														F	EDERAL ID	#			TR TRAV R REHE	ARSE	LY
LOCATION CITY WOR						ORK STA	K STATE COUNTY						F	FOREIGN				T TEST L LOOF WF WOR	PING	н		
	ODUCTIOI	N							ST		LOCATION		DD #							TRF TRAV	EL WO	RK FINISH
ACCT #	DAY	DATE	WORK STATUS	START TRVL	MKP/WRD IN OUT		ON SET	ME IN	AL #1 OUT	MEA IN	AL #2 OUT	WRAP	MKP REM			TOTAL HOURS	T.T @ 1.5X	O.T @ 1.5X	DBL @ 2.0X	STUNT ADJ	NDB	MISC. PMT
	SUN																					
	MON																					
	TUE																					
	WED																					
	THU																					
	FRI																					
	SAT																					
	TOTAL																					
		RPOSES	IARY (TO INC	LUDE IN AG	ENT FEE)															E\$		
ACCT # HRS					-	RATE TOTALS			WEEKLY AMT \$ GL						00,		L Ψ					
			WEEK	WEEK/DAY				_														
			DAILY OT 1.5X					_	ACCT #		NON-TAXABLE PER DIEM MEALS		<u> </u>									
			DAILY OT 2X					_	\$ \$				PER DIEM MEALS									
			WEEKLY OT					_	-			PER DIEM LODGING			SING							
			LOC ALLOW				_					\$										
			STUNT ADJ								MILEAGE		MILEAGE									
ACCT		SUMMAR HRS	Y (DO NOT II	NCLUDE IN A		GENT FEE) RATE TOTALS					\$		\$									
		1110	WARDOBE FITTING				TOTALS				KIT RENTAL		KIT RENTAL									
			MEAL PENALTY								\$		\$						_	GRAN	о тот	AL
			FORCED CALL								ADV	ANCE	,	ADVANCE								
			WARDROBE CLEANING					-			\$		\$									
			TRAVE	L TIME				-						TALE	NT SIGNA	TURE						
					AGENT FEE					CAPS COPY APPROVED BY												

By signing this form, I authorize the employer, or its services or payroll provider, to take deductions from my earnings (regardless of payment method) to adjust previous overpayments if and when said overpayment may occur. By signing this form, I certify that I have reviewed the information on this record and it accurately reflects all my start and stop times of work in this period, and, unless noted above, I further certify that I have taken all meal and other breaks that I am entitled to for this period. CA residents: Your personal information may be collected in connection with certain services provided by Cast & Crew or its affiliated companies. A summary of your California privacy rights can be found at: https://www.castandcrew.com/privacy-policy/

APPROVED BY