



2300 Empire Ave., 5th Floor
Burbank, CA 91504
(310) 280-0755

1560 Broadway, Suite 701
New York, NY 10036
(310) 280-0755

CREW TIMECARD

Employer: CAPS, LLC, FEIN: 27-4217142

WEEK ENDING DATE

PRODUCTION CO.	PROD NAME/NUMBER	UNION	OCC CODE	OCCUPATION DESCRIPTION	ACCOUNT #	FRINGE ACCOUNT #
EMPLOYEE NAME	SOCIAL SECURITY NUMBER	WEEKLY \$	HRLY \$	GUAR HRS	LOCATION	ON PROD OFF PROD
LOAN OUT	FEDERAL I.D. NUMBER	WORK ZONE STUDIO DRIVE-TO BUS-TO DISTANT				

CITY	STATE	ACCOUNT CODE	LOCATION/SET	DATE	RE-RATE	OCC CODE	*TRVL	START	NDB	OUT	1ST MEAL		IN	WRAP	FOR COMPANY USE ONLY				TOTAL HOURS	MEAL PEN	ACCT	RATE	TYPE	HRS	TOTAL		
											OUT	2ND MEAL			IN	ST	1.5X	2X									
				SUN																						1X	
				MON																							1.5X
				TUE																							2X
				WED																							
				THU																							
				FRI																							
				SAT																							
										TOTAL HOURS																	MP

COMMENTS: _____

*T = Travel Day TW = Travel/Work WT = Work/Travel

TOTAL AMOUNT

ACCT	PER DIEM NON-TAX	ACCT	MILEAGE NON-TAX	ACCT	KIT RENTAL	ACCT	HAZARD
ACCT	PER DIEM TAX	ACCT	MILEAGE TAX	ACCT	CAR ALLOWANCE	ACCT	MULTI-CAM
ACCT	PER DIEM ADV	ACCT	MILEAGE ADV	ACCT	MEAL ALLOWANCE	ACCT	SAL ADV
ACCT	LODGING NON-TAX	ACCT	LODGING TAX	ACCT		ACCT	

EMPLOYEE SIGNATURE _____ APPROVED _____

Attention all CA employees: Effective 2/14/2014, CAPS has established a Medical Provider Network (MPN) for all work-related injuries and/or illnesses. In the event of an injury, your care will be directed to a physician within the MPN and you have the right to pre-designate a doctor. For further information, please visit <https://www.capspayroll.com/MPNNotice.pdf>, email MPN@capspayroll.com, or call 877-243-9910.