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 New York, NY 10011
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CREW TIMECARD

Employer: CAPS, LLC, FEIN: 27-4217142

PRODUCTION CO.			JOB NAME/NUMBER				UNION		CONTRACT TYPE		OCCUPATION	
EMPLOYEE NAME			M <input type="checkbox"/> SOCIAL SECURITY NUMBER		TELEPHONE			EMAIL				
			F <input type="checkbox"/> - -									

LOAN OUT				FEDERAL I.D. NUMBER				RATE			
								\$ PER _____ <input type="checkbox"/> HOUR <input type="checkbox"/> DAY <input type="checkbox"/> OTHER _____			

DATE	LOCATION ZIP CODE	AICP	RATE	START	1st MEAL 2nd MEAL		END	RATES				MP	COMMENTS	
								ST	1.5X					
SUN														
MON														
TUE														
WED														
THU														
FRI														
SAT														

YEAR	COVID STIPEND \$	COVID TEST DATE / /	AICP #	TOTALS								GROSS
AICP #	BOX RENTAL \$	AICP #	MILEAGE NON-TAXABLE \$	MILEAGE TAXABLE \$	AICP #	ADVANCE \$						GROSS W/BOX RENTAL AND MILEAGE \$
AICP #	CAR ALLOWANCE \$	AICP #	PER DIEM NON-TAXABLE \$	PER DIEM TAXABLE \$	AICP #	OTHER \$						

EMPLOYEE SIGNATURE _____ APPROVED _____

Attention all CA employees: Effective 2/14/2014, CAPS, A Cast & Crew Company 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 email MPN@capspayroll.com.