



Production Payroll Services, LLC
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 301-371-5910 info@productionpayrollservices.com
 FEIN# 45-4196260

UNION_ NON UNION WAIVER/TAFT HARTLEY

EXTRA VOUCHER
 PLEASE PRINT CLEARLY

NAME (LAST) _____ (FIRST) _____		PRODUCTION TITLE _____				TYPE OF CALL _____	
SOCIAL SECURITY NUMBER (REQUIRED) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		BASIC WAGE RATE _____		PRODUCTION COMPANY _____			APPROVED _____
WITHHOLDING: MARITAL STATUS: MARRIED <input type="checkbox"/> SINGLE <input type="checkbox"/> # DEPENDENTS _____ EXEMPT <input type="checkbox"/>		DATE OF BIRTH _____	FITTING _____	1ST MEAL: START _____ END _____ <input type="checkbox"/> AM <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> PM	2ND MEAL: START _____ END _____ <input type="checkbox"/> AM <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> PM	TRAVEL: LEAVE _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	ARRIVE _____ <input type="checkbox"/> AM <input type="checkbox"/> PM
DATE WORKED _____	WORK STATE _____	NIGHT PREMIUM _____	STARTING TIME _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	DISMISSAL TIME _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	TOTAL HOURS _____		
WARDROBE _____	MILEAGE _____	AUTO _____	NON DEDUCTABLE BREAKFAST START: _____ END: _____		DO NOT WRITE IN THIS SPACE		
PROPS _____	MEAL PENALTY _____	WET <input type="checkbox"/> SMOKE <input type="checkbox"/>	ALLOWANCE \$ _____	ADJUSTMENT \$ _____	PAYMENT _____	HOURS _____	AMOUNT _____
"I, the undersigned, certify that the number of income tax withholding exemptions claimed on the certificate does not exceed the number to which I am entitled." "I agree to accept that sum properly computed based upon the times and the basic wage rate shown as payment in full for all services heretofore rendered by me for Production Payroll Services LLC. I further agree that the said sum, less all deductions required by law, may be paid to me by negotiable check issued by said company, said check to be addressed to me at my last reported address and deposited in the United States mail within the time periods provided by law." "I hereby give and grant to the company named all rights of every kind and character whatsoever in and to all work heretofore done, and all poses, acts, plays and appearances heretofore made by me for you and in and to all of the results and proceeds of my services heretofore rendered for you, as well as in and to the right to use my name, likeness and photographs, either still or moving for commercial and advertising purposes. I further give and grant to the said company the right to reproduce in any manner whatsoever any recordation heretofore made by said company of my voice and all instrumental, musical, or other sound effects produced by me. I further agree that in the event of a retake of all or any of the scenes in which I participate, or if additional scenes are required (whether originally contemplated or not) I will return to work and render by services in such scenes at the same basic rate of compensations as that paid to me for the original taking." "By signing this form, I hereby agree that Production Payroll Services, LLC may take deductions from my earnings to adjust previous overpayments if and when said overpayments may occur." THE UNDERSIGNED ACCEPTS EMPLOYMENT ON THE TERMS AND CONDITIONS SET FORTH ABOVE.					DAY _____	_____	_____
					1.5 _____	_____	_____
					2.0 _____	_____	_____
					_____	_____	_____
					_____	_____	_____
					WET/SMOKE _____	_____	_____
TOTAL PAYMENT > _____	_____	_____					
SIGN (PARENT IF MINOR) _____					COMMENTS _____		
<input type="checkbox"/> CHECK HERE IF NEW ADDRESS							
ADDRESS _____		EMAIL _____					
CITY _____	STATE _____	ZIP _____	PHONE _____		WHITE-PAYROLL PINK-PRODUCTION YELLOW-EXTRA		