

LOAN-OUT COMPANY START FORM AND AGREEMENT

Production Company	Signatory Company	Production Title
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Name of Loan-Out Company	Federal Employer ID Number
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Street Address	Apt #	City	State	Zip
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() - Business Phone Number	State of Incorporation	Date of Incorporation / /
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Loan-Out Company is qualified to do business in: <input type="checkbox"/> New York <input type="checkbox"/> California	List ALL OTHER states in which Loan-Out Company is qualified to do business:
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NOTE: Proof of Authorization to Do Business in the Work State is required.

		<i>For Accounting Use Only</i>	
Union / Local No.	Position / Job Classification	Fringe Accounting Code	Labor Accounting Code

Hour	Day	Week			/ /
Rate per: (Select One)			\$\$\$ Rate	Work State	Guaranteed Hours
					Start Date

Box Rental Rate: (Must Attach Separate Box Rental Form Weekly)	Per Diem	Other Payments / Terms
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First	M.I.	Last		Y N
Name of Loaned-Out Employee			Social Security Number	U.S. Citizen

Address of Loaned-Out Employee	Apt #	City	State	Zip
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() - Home Phone Number	() - Cell Phone Number	E-Mail Address
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DATE OF BIRTH Month / Day / Year	ETHNIC CODE WHITE BLACK HISPANIC ASIAN NATIVE AMERICAN OTHER	M F Gender
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MINOR IS EMPLOYEE A MINOR? Yes <input type="checkbox"/> No <input type="checkbox"/>	AGENT / AGENCY NAME: Address: _____ _____	Send Payments to Agency? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>Authorization must be submitted.</i>
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Loan-Out Company Authorized Signature	Print Name and Title of Authorized Signer	Date
Loaned-Out Employee Signature	Print Name of Loaned-Out Employee	Date
Production Company Authorized Signature	Print Name and Title of Authorized Signer	Date

*** A completed W-9 Form and a completed I-9 Form for the Loan-Out Company's Loaned-Out Employee, must accompany this form in order to process payroll. ***

*** Until acceptable proof of qualification to do business in the work state (Articles of Incorporation and/or Certificate of Good Standing) is provided, all required withholdings and employee and employer contributions shall be deducted and withheld from all payroll issued ***