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Performer Time Report

Mail/Overnight: 4230 Tuller Rd #200 Dublin OH 43017 **Fax:** 800-559-6402 or mail@falconpaymasters.com

INSTRUCTIONS: Producer/Client completes Section A and signs at bottom for all projects. Producer also completes Section B IF the project is for union commercials. The performer ("Payee") must complete Section C and sign at bottom. Producer/Client must send completed time sheets to Falcon promptly after session. Stunts require prior approval of our Workers Comp carrier.

A. Bill To ("Client"): _____ ATTN: _____
PO#: _____ **Job#:** _____ **Project Title/ID** _____ **Job City:** _____
For: Radio TV In-House Category I In-House Category II Internet Infomercial Other _____
Signatory: Falcon Other _____

B. Ad Agency _____ **Product & Sponsor** _____ **Studio** _____ **Ad-ID:** _____ Falcon to provide Ad-ID
Use: Wild Test Cable System Cable Network Dealer A Dealer B Program Spanish Internet New Media Simulcast Other: _____
Markets _____ **First Air Date:** _____ **Cycle:** 13 WKS Other: _____ **Track Cycle?** Yes No

C: PERFORMER (PAYEE) MUST COMPLETE SECTION C AND SIGN AT BOTTOM.

First, MI, Last (legal name) _____ **Day Ph (____)** _____ **E-mail:** _____
Home Address _____ **City** _____ **ST** _____ **Zip** _____ if new address
Send Check to (if not home) Recipient _____ **Address** _____ **City/ST** _____ **Zip** _____
Email: _____ (Your email address will be kept confidential. We will only use it to contact you for work related communication.)
 if under 21 **SSN:** _____ (required even if Loan-Out. **If legally incorporated, you must enter TIN and attach a W-9: TIN:** _____)
Tax Status: Single Married Married, but withhold at single rate **Number of withholding allowances claimed:** _____ Exempt
Player Type: On-Cam Principal/Day Player VO On-Cam Spokesperson Extra **Other:** _____ **Union** Non-Union **If union, is this your first union job?** Yes No
Talent Agency: _____ **Booker:** _____ **PH:** _____ **Commission:** _____ %

Job Day	Job Date	Work Description (Session, Travel, Audition, etc)	Pay Rate if scale enter "S"	Start Time	Meal Period		8-Hr Finish Time	OT @ Time and 1/2		OT @ Double-time	
					FROM	TO		FROM	TO	FROM	TO

Comments / Reimbursements (Attach receipts):

Payee accepts employment from Bill To/Client contingent on the fulfillment of terms stated herein and swears under penalty of perjury that he/she is entitled to the tax allowances/status claimed and that he/she can legally accept work in the U.S. If the work is performed under union code, the Payee independently agrees to be bound by the applicable code regardless of the Payee's standing with the union. Payees claiming independent contractor or similar status swear that they meet all legal qualifications thereof and hereby indemnify and hold harmless Falcon, its affiliates and all other parties to the work from and against all claims (including unemployment and Workers Comp claims), liabilities and costs arising from said payee's fraudulent claim of tax status. **The Client** in forwarding or causing the forwarding of this report to Falcon, regardless of completeness of report, beneficiary of the work or client's signatory status to any applicable union code: (1) Provides a guaranty to pay Falcon Paymasters the sums indicated herein, and such additional sums as required henceforth for Falcon service fees and timely compliance with civil authorities and union codes (if applicable to the work). (2) Agrees that the right to use the work is contingent on the timely payment to Falcon of these sums and adherence to the terms herein. (3) Accepts sole liability for consequences of failing to determine the need for and provide completed documents necessary to legally perfect Falcon or client obligations expressed or implied herein or by applicable jurisdictions. (4) Waives, except as proven by compliance hereto, all rights to presentment, protest, notice, demand or action on the part of payee, Falcon, Falcon affiliates or assignees, or to require arbitration or undertake suit or countersuit against Falcon, its assignees or affiliates with regard to any indebtedness or liability owed payee, Falcon, or other entities for use of the work. (5) Agrees that the Client's liability under terms herein is independent of any collective bargaining agreements or civil guarantees or obligations that may be in effect at the time the work was performed and is binding upon the Client his/its successors and assignees thereof. Notice of dissolution, demise, merger or acquisition shall not relieve the Client, assignees or successors from any current or continuing obligations arising under this Agreement. (6) Understands that he/it may be relieved of union obligations herein only by the execution of a valid assumption agreement. **Persons** signing this report on behalf of Client, warrant that they have advised Client of all terms and conditions herein and are authorized by Client to bind Bill To/Client to the terms and conditions herein.

PAYEE / GUARDIAN SIGNS HERE _____ **Date** _____ **BILLTO/CLIENT** _____ **Date** _____