

## **Box/Kit Rental Inventory**

Production Company:			
Employee:		SSN (last four digits):	
Loan-Out Company:		Federal ID#:	
Rental Rate:		Per Week	Per Day
Rental Commences On:			
Must be recorded on empl			
Week Ending Date:			
Detailed inventory required. (At	ach additional pages if neces	sary.)	
Item Description:			
1.			
<u>2.</u>			
3.			
_			
6.			
<u>7.</u>			
Inventory (check one): On F	le Attached		
Employee/Loan-out agrees that Loan-out's direction and control hereby waives any claims again Company to resolve any such of	. Employee/Loan-out is solely ast Cast & Crew for any loss o	responsible for any damage to	
Cast & Crew shall have no obliginsurance coverage for the bendermany and Employee/Loan-	efit of Employee/Loan-out cov	ering the equipment herein de	scribed. Further, the Production
I attest that the above-describ	ed equipment represents a	valid rental for this producti	on.
Employee Signature	Date		
Approval Signature	Date		