B-T-L Payrolls, LLC

2300 Empire Avenue, 5th Floor Burbank, California 91504-3350 818.848.6022 1560 Broadway, Suite 701 New York, NY 10036 212.938.0995 BTL-SI VER. 01/23

| | | | | | Start/Close For |
|---|--|-----------------------------|---------------------------------------|---|-------------------------------|
| oducing company | | | Project title | | |
| cial security number | Employee legal na | ame | | Date of bi | irth |
| rmanent address (include number and s | street, city, state, and zip code) | | | | |
| *** | | | | | |
| illing address *if different* (include nur | mber and street, city, state, and zip co | ode) | | | |
| one number | E-mail address | | | ACA hiring | g status |
| nder (optional) Ethnicity (option Check one: | ☐ AP - Native Hawaiian or P | acific Islander (Not Hispan | | rican or Alaska Native (Not His OT - Other | |
| bb description | | Hire state | Work state | Start date | |
| | | | | | |
| Terms of employment | Studio | | Distant | Accou | nt Number |
| Rate per hour | | | | | |
| Rate per week | | | | | |
| Hours per day | | | | | |
| Hours per week | | | | | |
| 6th and 7th days | y 6th day at Pay 7th day a | Pay 6th day \$ | at Pay 7th day at \$ | | |
| Equipment rental | | | | | |
| Car allowance | | | | | |
| Cell allowance | | | | | |
| Additional allowances | | | | | |
| Note: Overtime will be calculate | ed pursuant to applicable law or | contract. | | | |
| Additional client use | | For payroll comp | any use only | | |
| | | | | | |
| y signing this form, I authorize the emp | oloyer, or its service or payroll provider | r, to take deductions from | L L L L L L L L L L L L L L L L L L L | overpayments if and when | said overpayments may occur." |
| .gree" - Employee signatu | ure and date | П | Authorized signature | s) and date(s) | |
| | | | | | |