

PTPS Time Card

Version: Jan. 2025

TIMECARDS MUST BE SUBMITTED WITHIN 48HRS OF JOB OR TIME OF CHECK RECEIVED COULD BE AFFECTED

PICTURE THIS PRODUCTION SERVICES 6 Stage				CHECK RECEIVED COULD BE AFFECTED				
				Job #				
				J	ob Name			
	0,1-7		Pro	oducer/S	upervisor			
Name: Phone #				Position Rate \$ leave blank if unknown				
				Hours	nours	riours		3
Total Hour	s Worked	(Including	Overtime:			Total F	Payroll:	
- Otal Hours	s Workeu	(including	Over time.			Iotair	ayron.	
					or and exp	· -		
			Ехр	enses (A	Attach Re	eceipts to	o Time C	ard)
					Fee			
			Federal Mileage \$0.70 (Over 25 Miles from City Hall)					
			Reimburs	ements (Parking, I	lotel etc.		
			Signa	tures:				
Employee				Supe	rvisor			

PAYROLL DATE

Please be mindful of your time while on set or location. Before going past your half-day, lunch break or overtime point, inform your lead crew member. If you are the appointed crew lead, or working solo, please tell the client of upcoming breaks and/or work periods.