

Solomons Productions

Box Rental Weekly Invoice

Job Name & Number:	
Employee:	
Last Four SSN# Loan Out Company:	
Rental Rate: \$	Per week/day:
Week Ending Date:	
Inventory (attach additional page	if necessary):
for use under Employee/Loanout's responsible for any damage to or l Solomons Productions for any loss	equipment listed herein is rented to Production company direction and control. Employee/Loanout are solely oss of such equipment and hereby waive any claims against or damage of any kind. The Production Company and ant listed herein is being rented at competitive rates.
I attest that the above-described e	quipment represents a valid rental for this production.
Employee Signature	
Limployee Signature	Date
Approval Signature	 Date