



DEAL MEMO

Production Company _____

Employer of Record

PayReel, Inc.
24928 Genesee Trail Road Ste 100
Golden CO 80401

Project: _____

Please print legibly!

Employee Name (last, first, middle initial)		Position		Last 4 of Soc Security #	
Mailing Address (street, city, state & zip)					
Work State	Start Date	Supervisor Name			
Primary Phone	Backup Phone		Email		

Guaranteed Rate Hourly _____ Daily _____ /# of Hours _____ Weekly _____

Kit rental description _____ Rate _____ (day/week)
Please submit EXPENSE/EQUIPMENT REPORT with weekly timesheet.

EMERGENCY INFORMATION

Emergency Contact _____ Phone _____

Physician _____ Phone _____

Health Insurance Provider _____ Policy # _____

Are there any medications, allergies or conditions that we should be aware of _____

Employee Signature _____ Date _____

Supervisor Signature _____ Date _____