Box Rental Weekly Invoice

Production Company: Kanan Productions Inc.- Raising Kanan S3

Employee: _____ **SSN#:** _____

Loan-Out Company: _____

Federal ID#: _____

Rental Rate: $ _____ **Per Week/Day:** _____
(must be recorded on employee time card each week)

Week Ending Date: _____

Inventory *(attach additional pages if necessary)*:

Inventory *(check one)*: ☒ ON FILE ☐ ATTACHED

Employee/Loan-Out agrees that the equipment listed herein is rented to Production Company for use under Employee/Loan-Out's direction and control. Employee/Loan-Out is solely responsible for any damage to or loss of such equipment and hereby waive any claims against Entertainment Partners for any loss or damage of any kind. Entertainment Partners shall have no obligation to indemnify Employee/Loan-Out against any losses or damage, or to provide any insurance coverage for the benefit of Employee/Loan-Out covering the equipment herein described. Further, the Production Company and Employee certify that the equipment listed herein is being rented at competitive rates.

I attest that the above-described equipment represents a valid rental for this production.

Employee Signature _____ Date _____

Approval Signature _____ Date _____

Hello world

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