

Producer: Director: P.M.: 1st AD: Set Cell:	TITLE OF PRODUCTION DPR DAY -- of -- DATE:	PRODUCTION COMPANY ADDRESS Street City, Province Phone:
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DATE STARTED:	SCHEDULE FINISH DATE:
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LOCATIONS:

CALL TIME:		1 ST SHOT AM:		LUNCH:		1 st SHOT PM:	
PRE-CALLS:	See Grid					WRAP:	

CAMERA CARDS	SOUND CARDS
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SCRIPT	SCENES	PAGES	EST. TIME	ACTUAL TIME	SETUPS	SCENES ADD/DROP
SHOT TODAY						
SHOT PREVIOUS						
TOTAL TO DATE						
TOTAL IN SCRIPT TO BE SHOT						

#	CAST	CHARACTER	CALL TIME	MU HAIR WDRB	MEAL START-FINISH	WORK START-FINISH
1						

NOTES: (Anyone late? Leave early? Illness. altercations, complaints, tech problems.

SAFETY NOTES: Safety meeting(s) held, accidents, exposure to toxic chemicals, environmental risks

Production Manager/ Producer (signed) _____