CAST DEAL MEMO

PRODUCTION COMPANY		DATE
ADDRESS		PHONE#
		FAX#
SHOW		EPISODE
CASTING DIRECTOR		PROD#
CASTING OFFICE PHONE#		FAX#
ARTIST		SOC. SEC.#
ADDRESS		PHONE#
		MOBILE#
ROLE		START DATE
STUNT SINGER PILOT DANCER	—— ACTOR TELEVISION CABLE MULTIMEDIA INTERNET	THEATRICAL DAY PLAYER 3-DAY PLAYER WEEKLY D/PU - DAILY TO WEEKLY D/PU - DAILY TO DAILY
COMPENSATION \$		Per DAY WEEK SHOW
FITTINGS		
OTHER		
BILLING		

PAID ADVERTISING

AGENT	OFFICE#
AGENCY	
ADDRESS	MOBILE#
	E-MAIL
MANAGER	OFFICE#
MANAGEMENT CO	FAX#
ADDRESS	MOBILE#
	E-MAIL
PUBLICIST	OFFICE#
P.R. FIRM	FAX#
ADDRESS	MOBILE#
	E-MAIL
LOANOUT	
CORP. NAME	FED. ID#
ADDRESS (If Different From Above)	
EMPLOYER OF RECORD	
	PHONE#
	FAX#
ARTIST	
(signature)	DATE
APPROVED BY	
TITLE	DATE