



DATE			
DAY		OF	
CREW CALL		WRAP	

# DAILY PRODUCTION REPORT

PAGE \_\_\_\_ OF \_\_\_\_

**TO REPORT AN UNSAFE SITUATION, PLEASE CONTACT YOUR EP IMMEDIATELY.**

Title:
Producer:
Location:

Position	Name	Set	Wrap	Lunch In	Lunch Out
PRODUCER					
DIRECTOR					
DP					
CAM OP					
DMT/BTS					
SOUND REC					

SUBJECT/LOCATION	TIME IN	TIME OUT	TOTAL SHOOT TIME

SHOTS (#) PLANNED/TAKEN	
SHOTS (#) ADDED	
SHOTS (#) CUT	
TOTAL DATA RECORDED (CARDS/MINS) TODAY	
TOTAL DATE RECORDED (CARDS/MINS) TO DATE	



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RECAP OF THE DAY / PROBLEMS & SOLUTIONS

PRODUCER:



