AMERICAN FEDERATION OF MUSICIANS RADIO TO NON-COMMERCIAL RECORDING REPORT FORM FOR SYMPHONIC USE ONLY **Continuation Sheet**

	Continuation Sheet RPNo.							
LOCAL UNION NO. CARD NO.	EMPLOYEE'S NAME (As on Social Security Card) LAST FIRST INIT. (Instrument(s))	HOME ADDRESS (Give Street, City & State)	SOCIAL SECURITY NUMBER	WAGES	PENSION			

Distribution of the 6 copies of this report form is as follows: 1. Original page is to be sent to, AFM-EP Fund, 304 East 44th St., New York, NY 10017 with Pension contribution check made payable to the AFM-EP Fund 2. One copy is to be retained by the Signatory of Records 3. The remaining 4 copies are to be sent to the applicable AFM Local with the musicians' checks

The AFM Local will: • retain one copy • send one copy to the American Federation of Musicians, 1501 Broadway, Suite 500, New York, NY 10036 • send one copy to the Leader • send one copy to the Leader • send one copy to Health & Welfare Fund (where applicable) • send one photo copy to the Orchestra Committee Chairperson

Pension Contribution see appropriate pension section of the AFM Phonograph Record Labor Agreement for information regarding distribution of Pension payments

Health and Welfare Payments see appropriate health & welfare payment section of the AFM Phonograph Record Labor Agreement for information regarding distribution of health & welfare payments

Include all music prep. information on this form or a continuation sheet, with copies of invoices attached. FOR FUND USE ONLY:

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