



Background Actors - Inquiries and Corrections

Please fill out this form, print, sign, and return to EP using one of the following methods:

- **Email:** CPInquiries@ep.com
- **Mail:** Entertainment Partners
Attn: Casting Payroll
2950 N. Hollywood Way
Burbank, CA 91505

Please indicate type of inquiry:

<input type="checkbox"/> Earnings Report Personal Use	<input type="checkbox"/> Tax Form Copy (W2/1099)
<input type="checkbox"/> Earnings Report SAG-AFTRA	<input type="checkbox"/> Tax Form Correction (W2/1099)
<input type="checkbox"/> Name or SSN Correction*	<input type="checkbox"/> Pension Letter (W2)
<input type="checkbox"/> Missing Work/Covid pay/correction**	<input type="checkbox"/> Other

Tax Year(s) of Inquiry:

*For Name/Social Security number correction, please attach a copy of your Social Security Card and/or other supporting documentation.

First Name: _____ Last Name: _____

Phone: _____ Last 4 of SSN: _____ DOB: _____

**For missing work/covid payment or correction to a payment: Attach a copy of your voucher (or other supporting documentation) and fill in the following information:

Production Title/Show Name: _____

Work date(s): _____

In and out time: _____

Break(s): _____

Role for the day: _____

For all other inquiries, please provide additional information as needed:

Delivery Options:

Email: _____

Mail: _____

Employee Signature: _____ Date: _____

PLEASE NOTE: We do not accept computer electronic signatures (e.g., DocuSign, SignNow, eSign). We will accept a markup signature from your iPhone or Android.