

SOUND REPORT

Sound Mixer: _____

Phone: _____

Email: _____

Roll #: _____

Date: _____

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Title:			Director:			Producer:			
Recorder:		Sample Freq:		Bits:		Media:		File Type:	
Timecode:				Tone:		Metafile Text:			

NOTE: Transfer only channel 1 for dailies unless otherwise noted.

Multiple Prints	Scene	Take	Segment or PNO#	Notes	Tracks						
					1	2	3	4	5	6	