

DAILIES SCREENING NOTES



Prod #: _____

Date Shot: _____

Title: _____

Director: _____

Scene: _____

SCENE	TAKE	NOTES			
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
		<input type="checkbox"/> Sync <input type="checkbox"/> MOS <input type="checkbox"/> Series	<input type="checkbox"/> Best Take	<input type="checkbox"/> Good	<input type="checkbox"/> No Good