



SCRIPT SUBMISSION FORM

Date of Submission: _____ Date : _____

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Writer(s): _____ Creator(s) _____

Cast members (add their most important CREDITS next to their names):

Genre: _____ Budget: _____

One line summary: _____

Full summary/Plot:

Filmed on (check one): 4k , 5k , other _____

Rights available (check one): Domestic International Worldwide other _____

Contact person: _____ Trailer/Movie's website : _____

Phone & Fax : _____

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Address: _____

Please attach a synopsis as well!

Lee Production

Acquisitions Department

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