



Video Editing Form

Customer Information:
Name:
Phone #:
Project Name:
Video Total Running Time:

To be deleted video clips			
	Starting Time		Ending Time
	hr:min:sec		hr:min:sec
Example	0:12:15		0:14:03
clip #1			
Clip #2			
clip #3			
Clip #4			
Clip #5			
Clip #6			
clip #7			
clip #8			
clip #9			
clip #10			
clip #11			
clip #12			