

COMPLETION CERTIFICATE

in respect of the Grant Agreement - **Label, Manager & Distributor Business Development**
 dated the _____ day of _____, 20_____

The undersigned Applicant, hereby certifies that:

- (a) the information contained herein is true, correct and accurate; and
- (b) the Applicant has incurred or expended an amount equal to the total costs of the Label, Manager & Distributor Business Development initiative specified below in accordance with all the information provided in the Application and pursuant to all other terms and conditions of the Agreement.

PLEASE INDICATE A RESPONSE FOR EACH QUESTION

File #: _____ Record Company Artist Manager Distributor

Applicant: _____

Address: _____

City/Prov: _____ Telephone: _____

Contributions By Others:

Source of Funding	Amount	Government		Recoupable?	
_____	\$ _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	\$ _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	\$ _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

The following items must be included in your package to FACTOR:

- This completed, dated and signed Completion Certificate.
- Two sets (1 original and 1 photocopied) of all expenses invoices/receipts and proof of payments. The originals will be returned to you with the final payment. **PLEASE SEPARATE THE ORIGINALS AND PHOTOCOPIES INTO 2 SEPARATE STACKS!**
- A written report on what was accomplished in this initiative. Include a response to the 2 **Project Goals and Expected Results** Follow-Up questions below (you may attach a separate sheet if needed).

Please explain in detail whether you met the projected goals as outlined in your original application:

1. What results were you able to achieve?

2. What, if any, were the unexpected results achieved?

|----- Applicant Use Only -----|

|- FACTOR Use Only -|

Budget Breakdown	Projected Cash Expenditure	Actual Cash Expenditure	Approved Costs
Subscriptions	_____	_____	_____
Industry Directories	_____	_____	_____
Clipping Services	_____	_____	_____
BDS	_____	_____	_____
Mediabase	_____	_____	_____
Soundscan	_____	_____	_____
Database Development	_____	_____	_____
Memberships to Relevant Organizations	_____	_____	_____
Web-site Development	_____	_____	_____
Web-site Maintenance	_____	_____	_____

Other Marketing & Promotion Expenses (non artist specific) - please specify each and attach additional pages if necessary:

1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____
5) _____	_____	_____	_____
6) _____	_____	_____	_____

Total Eligible Budget	_____	_____	_____
50% of Total Eligible Budget	_____	_____	_____
Total Request From FACTOR	_____	_____	_____

Please keep in mind that, under this program, eligible expenses are only those incurred during the FACTOR fiscal year (April 1 - March 31) in which you applied. If there are differences between your projected costs and your actual costs, please take the time to fill out the attached variance report.

Incomplete forms that are not signed, witnessed or missing documentation will delay the release of the final payment.

This Completion Certificate is dated _____, 20_____.

(Authorized Signature)

Witness

VARIANCE REPORT

Please take the time to explain in detail under each individual item why there was a difference between the projected costs and the actual costs. Please attach additional pages if necessary.

Subscriptions	<hr/> <hr/>
Industry Directories	<hr/> <hr/>
Clipping Services	<hr/> <hr/>
BDS	<hr/> <hr/>
Mediabase	<hr/> <hr/>
Soundscan	<hr/> <hr/>
Database Development	<hr/> <hr/>
Memberships	<hr/> <hr/>
Web-site Development	<hr/> <hr/>
Web-site Maintenance	<hr/> <hr/>

Other Marketing & Promotion Expenses

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