

## COMPLETION REPORT: BUSINESS TRAVEL

**PLEASE REVIEW THE PROGRAM GUIDELINES FOR THIS PROGRAM BEFORE COMPLETING THIS REPORT.**

### Important Notes

- 1) Completion Reports must be accompanied by two sets of ALL expense invoices and receipts, as well as proof of payments (original and a photocopy). These may include cancelled cheques, bank drafts, credit card receipts, etc.
- 2) Separate the originals from the photocopies. The originals will be returned to you with the final payment.
- 3) Cash payments may be accepted only for incidental purchases, suppliers and per diems and must be supported by a store receipt or signed receipt. In the case of suppliers, cash payments will only be considered eligible when accompanied by a signed Receipt for Services (available at [www.factor.ca/documents.aspx](http://www.factor.ca/documents.aspx)). Larger ticket items and personnel fees must be paid by cheque, money order or other non-cash instrument.
- 4) Completion Reports missing documentation will delay the release of the final payment. If you are notified that your Completion Report is incomplete, you will be given only one opportunity and 30 days to submit the required documentation, failing which your Completion Report will be processed as is.
- 5) Ensure you have signed the final page of the Completion Report.
- 6) All amounts must be provided in Canadian dollars. Please provide proof of the exchange rate used. If proof is not provided, FACTOR will calculate the exchange rate using a monthly average of that currency.
- 7) Unsigned or otherwise incomplete forms will delay the release of the final payment.

### Completion Checklist

#### MANDATORY MATERIAL:

**Please be sure that the following items are included in your package to FACTOR. Failure to include these required items could result in a delay or denial of payment.**

- A fully completed and signed copy of this Completion Report.
- Two sets (original and a photocopy) of ALL expense invoices and receipts, as well as proof of payments. Please see **Important Notes above** for further details.
- A detailed **written trip report** to include: travel itinerary (dates, locations), what was accomplished, whether projected goals in the original application were met, and any unexpected results.

**Incomplete Reports will result in delay or denial of payment.**

### Applicant Information

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext: \_\_\_\_\_  
 Address: \_\_\_\_\_ Fax : \_\_\_\_\_  
 Suite: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_ File #: **DID-** \_\_\_\_\_

## Budget & Travel Details

Complete a copy of this page for each trip you are applying for. Ensure you indicate the "Trip #" and transfer the information to the associated budget line.

### Trip # \_\_\_\_\_ : Details & Budget

Destination(s): \_\_\_\_\_ Full Name of Conference: \_\_\_\_\_

Dates of Conference (if applicable): \_\_\_\_\_ Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Are attendees full-time employees?  Yes  No

Names & Job Titles of Attendees: \_\_\_\_\_

	Applicant Use Only		FACTOR Use Only
	Projected Expenditure	Actual Expenditure	Approved Costs
<b>Registration Fee(s)</b>	_____	_____	
<b>Travel:</b> <input type="checkbox"/> Air (flight) <input type="checkbox"/> Ground (vehicle rental)	_____	_____	
<b>Additional Ground Transportation</b>	_____	_____	
<b>Hotel Accommodations</b>			
# of nights _____ x # of rooms _____ x rate \$ _____	_____	_____	
<b>Per Diems</b>			
# of days _____ x # of people _____ x rate \$ _____	_____	_____	
<b>Promotional Materials (conference only)</b>			
Artists Video Compilation	_____	_____	
Catalogues/ Sell Sheets	_____	_____	
<b>Total Budget Trip # _____</b>	_____	_____	

### Declaration of Other Government or Radio Funding Related to Trip # \_\_\_\_\_

Other Sources	Name of Source	Amount
Radio Starmaker Fund	_____	_____
Canada Council for the Arts	_____	_____
Other Radio Source (specify)	_____	_____
Other Radio Source (specify)	_____	_____
Provincial Funding (specify)	_____	_____
Municipal Funding (specify)	_____	_____
Other Government Source (specify)	_____	_____
Other Government Source (specify)	_____	_____
<b>Total Contribution from Other Sources</b>		_____

## Written Trip Report

Please complete and attach a detailed **written trip report** to include: travel itinerary (dates, locations), what was accomplished, whether projected goals in the original application were met, and any unexpected results.

## Budget Summary

	Applicant Use Only		FACTOR Use Only
	Projected Expenditure	Actual Expenditure	Approved Costs
<b>Total Trip #1</b>	_____	_____	
<b>Total Trip #2</b>	_____	_____	
<b>Total Trip #3</b>	_____	_____	
<b>Total Trip #4</b>	_____	_____	
<b>Total Trip #5</b>	_____	_____	
<b>Total Trip #6</b>	_____	_____	
<b>Total Trip #7</b>	_____	_____	
<b>Total Trip #8</b>	_____	_____	
<b>Total Trip #9</b>	_____	_____	
<b>Total Trip #10</b>	_____	_____	
<b>Total Eligible Costs (total of all trips)</b>	_____	_____	
<b>50% of Total Eligible Costs</b>	_____	_____	
<b>TOTAL REQUEST FROM FACTOR:</b>	_____	_____	

Variance Report

If variances occurred between the projected expenses, as detailed in the original application, and actual expenses, a reason for the variance must be provided here.

(Attach an additional sheet if necessary)

Multiple horizontal lines for providing variance details.

Required Signatures

Please note that incomplete Reports that are not signed or witnessed, or are missing documents will delay the release of the final payment.

The undersigned Applicant hereby certifies that

- (a) the information contained herein is true, correct and accurate; and
(b) the project that is subject of this Completion Report was executed as proposed in the Application and in accordance with the Program Guidelines, the Applicant Agreement, the General Agreement between the Applicant and FACTOR, and FACTOR's business policies.

Name of Recipient: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Witness: \_\_\_\_\_

Name and Title of Signatory: \_\_\_\_\_