

FORM C - SCORING FINAL APPLICATION

Tennessee Entertainment Commission (615) 741-FILM (3456) TN.entertainment@tn.gov

PROJECT IN	FORMATION
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PROJECT INFORMATION					
Project Title	Type of Production	N (i.e. Gaming, Feature film, Television,	Name of Company		
Composer	Supervisor		Engineer		
Composer	Supervisor		Liigiileei		
COMPANY INFORMATION (payme.	nt will be issued to this compan				
Company Name	Contact Name		Contact Title		
Contact E-mail Address	Contact Phone		Contact Fax		
Company Address	Company City, Sta	ate, Zip	Company Phone		
Company Website	State where Incorp	porated or Registered	Federal Tax ID Number (FEIN)		
Type of Entity (e.g. "C" or "S" Corporation,	LLC, Partnership, Trust, etc.)				
Indicate if the production company is certii (as defined in T.C.A. §12-3-801 through 8	ied as minority-owned, women-own 08 and Public Chapter 1140 effectiv	ned, or service-disabled veteran own ve July 1, 2010)	ned:		
PROJECT FINANCIAL INFORMATI	ON				
Total Budget (entire scoring project)		Total IN Expenditure	Total TN Expenditures (paid to only TN residents & vendors)		
Total TN Payroll (paid to only TN residents) Total TN Vendor Sper		or Spend (paid to only TN companies)			
	- 1		1		
TENNESSEE HIRES	1 =		1		
TN Musicians	TN Production S	Services (i.e. studio staff, engineers, catering	1)		
TENNESSEE PROJECT SCHEDUL PERIOD	ESSEE PROJECT SCHEDULE (Attach additional pages if necessar) TN START DATE		NUMBER OF DA	AVC	
Production	INSTART DATE	TN END DATE	NUMBER OF DE	110	
1 TOGGORIOTI					
ADDITIONAL INFORMATION					
Date of Last Qualified Expenditure Incurred in TN		Anticipated Release	Anticipated Release		
	, ,	Company has satisfic	ed all financial obligations	, , , , , , , , , , , , , , , , , , ,	

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ATTACH	THE FOLLOWING DOCUMENTS WITH YOUR AP	LICATION (No use of commas, "&" and any special character in the file name)
	Detailed, current plans for distribution, including nar Final Budget General ledger (TN Expenditures) Total Payroll report (excluding/obscuring individual strained of Legal Existence from the Secretary of Declaration of Residency Forms - attach proof of refinal Crew list – include address and contact inform Final Vendor list – include address and contact inform	cial security numbers) tate dency and alphabetize by last name tion
State of	Tennessee by filing a knowingly false or fraudulent cl	s true and correct, and I am aware that any applicant that obtains incentives from the m shall be liable to the State of Tennessee for reimbursement of all monies received. By guarantee receipt of the incentive or that incentive funds will be available.
Signati	ure	Date
Printed	Name	Title

SEND COMPLETED APPLICATION TO: Tennessee Entertainment Commission Email: <u>TN.entertainment@tn.gov</u>

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