

## CHECKLIST FOR ST. BERNARD PARISH FILM INCENTIVE

## St. Bernard Parish Office of Tourism and Film

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| PROD  | UCTION   | NAME:   |  |
|---|--|---|--|
| PRE-A   | UDIT   |   |  |
|   | ☐ Did the production submit the St. Bernard Parish Questionnaire? (Date Submitted:) ☐ Did the production lease office or soundstage space in St. Bernard Parish? |   |  |
|   |  | Office Lease: Dates (mm/dd/yyyy) / / / /  |  |
|   |  | Soundstage Lease: Dates (mm/dd/yyyy) / / / Location of Lease (Physical Address)                         |  |
|   | Did the  | production submit a Budget? production submit a Distribution Plan? production submit a Script Synopsis? |  |
|   | _  | St. Bernard Parish spending?  |  |
| POST  | AUDIT  |   |  |
| <ul> <li>Did the production submit an audit of St. Bernard Parish production costs?</li> <li>Did the production submit the Declaration of Residency Forms?</li> <li>Did the production include an end-credit or an alternative?</li> <li>Did the production submit a St. Bernard Parish payroll ledger?</li> <li>Did the production submit a St. Bernard Parish vendor ledger?</li> </ul> |  |   |  |
|   |  | spend in St. Bernard Parish? of incentive rebate?   |  |
|   | □ Date Film Incentive Review Panel completed final review:/  |   |  |
| NOTE  | S: (in of  | fice use)   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |