



Contract #: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Date: \_\_\_\_\_

410-93 Lombard Ave  
 Winnipeg, Manitoba R3B 3B1  
 P: (204) 947.2040  
 www.mbfilmmusic.ca  
 music@mbfilmmusic.ca

**IMPORTANT: KEEP A COPY OF ALL FORMS AND RECEIPTS FOR YOUR RECORDS.**

**Cost Report Form**

All corresponding invoices/receipts with their acceptable proof of payment must be attached.

FOR OFFICE USE ONLY

RECEIPT NO.	PAYEE	DESCRIPTION OF SERVICE PROVIDED	PAID AMOUNT (LESS GST/HST)	DONATED AMOUNT*	ADMIN	MANAGER

I confirm that all information is verified true and correct. As the applicant I hereby authorize MANITOBA FILM & MUSIC to verify any of the costs reported herein.

Applicant Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Artist Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

A. TOTAL THIS PAGE/ALL PAGES:		
B. ADMIN FEE (A. x 15%; \$1500 max.)		
C. TOTAL A + B		
D. DONATED SERVICES (max. 25% of C)*		
FINAL TOTAL (A. + B. + D.)		

\*All donated services must be accompanied by an invoice/receipt. Do not include the donated amount from the invoice/receipt in the "Paid Amount" column.

NOTE: MANITOBA FILM & MUSIC RESERVES THE RIGHT TO PERFORM A RANDOM TEST OF INVOICES AND CANCELED CHEQUES, REGARDLESS OF BUDGET LEVEL. THIS SHALL INCLUDE CONTACTING SUPPLIERS AND/OR PAYEES FOR VERIFICATION OF SERVICES.