CANADA MEDIA FUND FONDS DES MÉDIAS DU CANADA

Final Cost Document
Linear Content
2026-2027

CANADIAN CONTENT AFFIDAVIT

Project Title: _____ ("Project")
CMF File No.: _____
Applicant Production Company: _____ ("Applicant")
Fiscal Year of Application: _____ (YYYY-YYYY) CMF
Application Program: _____

IN THE MATTER OF THE Canada Media Fund AND IN THE MATTER of the application of

_____
Name of the Application Production Entity
with respect to:

_____
Name of the Project

I _____ Resident of _____
Full name of the declarant City, Province

DO SOLEMLY DECLARE, that

1. I am a _____ and as such am providing/have provided my services to the Occupation
   Applicant on the Project from _____ to _____.
   Commencement Completion date of service

2. I am and will at all material times be a Canadian Citizen or Permanent Resident.

3. To the best of my knowledge, information and belief, the declared locations for animation activity listed below where applicable, are in Canada.

4. Please choose <u>one</u> of the following:

☐ To the best of my knowledge, information and belief, the individuals specified below as Canadians filling key creative positions for the Project are Canadian citizens and/or permanent residents, and I have made all reasonable inquiries to ensure the truth of this statement.

☐ I have submitted or will submit satisfactory documentary proof evidencing the citizenship and/or permanent residency status of the Canadian individuals filling key creative positions specified below.

Key Creative Personnel

Please insert the name of all persons filling the following positions and their citizenship:

ROLE	NAME	CITIZENSHIP	COMPANY & LOCATION
Producer(s)			
Executive Producer(s)			
Co-Producer(s)			
Associate Producer(s)			
Line Producer(s)			
Other Producer(s)			
Director(s)			
Principal Screenwriter(s)			
Other Screenwriter(s)			
Editor(s) / Off-line Editor(s)			
Music Composer(s)			
LIVE ACTION			
ROLE	NAME	CITIZENSHIP	COMPANY & LOCATION
Highest Paid Performer			
2nd Highest Paid Performer			
Production Designer / Art Director			
Director of Photography/ Technical/ Lighting Director			
ANIMATION			
ROLE	NAME	CITIZENSHIP	COMPANY & LOCATION
Storyboard Supervisor			
First or Second Highest Paid Voice			
Design Supervisor / Art Director			

Camera Operator & Operation Location(s)			
Layout & Background Location(s)			
Key Animation Location(s)			
Assistant Animation In-betweening Location			

PRINCIPLE CAST NAMES			
ROLE	ROLE	ROLE	ROLE

AND I make this solemn Declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

DECLARED before me

In (City) _____ _____
Signature of Declarant

In (Province) _____ _____
Please Print Name of Declarant

This _____ of _____ _____
Day Month/Year Signature of Commissioner or Notary

N.B. This document must be sworn before a Commissioner for taking Oaths or a Notary Public. Please ensure that all insertions are legible.