



CHECKLIST FOR ST. BERNARD PARISH FILM INCENTIVE

St. Bernard Parish Office of Tourism and Film

Katie Tommaseo

409 Aycock Street

Arabi, LA 70032

ktommaseo@sbg.net

(504) 278-4242

PRODUCTION NAME: _____

PRE-AUDIT

_____ 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) _____ / _____ / _____

Location of Lease (Physical Address)

_____ Soundstage Lease: Dates (mm/dd/yyyy) _____ / _____ / _____

Location of Lease (Physical Address)

_____ Did the production submit a Budget?

_____ Did the production submit a Distribution Plan?

_____ Did the production submit a Script Synopsis?

Budget for St. Bernard Parish spending? _____

POST AUDIT

_____ Did the production submit an audit of St. Bernard Parish productions costs?

_____ Did the production submit the Declaration of Residency Forms?

_____ Did the production include an end-credit or an alternative?

_____ Did the production submit a St. Bernard Parish payroll ledger?

_____ Did the production submit a St. Bernard Parish vendor ledger?

Amount spent in St. Bernard Parish? _____

Amount of incentive rebate? _____

_____ Date Film Incentive Review Panel completed final review: _____ / _____ / _____