



1. Production Title \_\_\_\_\_

## 2. Production Type

- Feature Film                       Mini Series                       Animation  
 Digital Feature                       TV Pilot                       Doc / Short  
 TV Series                       MOW                       Reality / Lifestyle  
 Other (please specify) \_\_\_\_\_

### Content

- CDN                       US                       Co-Production  
 Other (please specify) \_\_\_\_\_

## 3. Local Production Office

Local Production Company \_\_\_\_\_

Production Manager \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Province/State \_\_\_\_\_ Postal Code/Zip \_\_\_\_\_

Office # \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail Address \_\_\_\_\_

## 4. Parent Production Company (forwarding contacts)

Company \_\_\_\_\_

Production Executive \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Province/State \_\_\_\_\_ Postal Code/Zip \_\_\_\_\_

Office # \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail Address \_\_\_\_\_

## 5. Studio Information

Studio / Distributor \_\_\_\_\_

Contact Name \_\_\_\_\_

Office # \_\_\_\_\_

E-mail Address \_\_\_\_\_

## 6. Number of Production Days

Live Action \_\_\_\_\_ Total Prep Days \_\_\_\_\_ Total Shoot Days \_\_\_\_\_ Total Wrap Days \_\_\_\_\_

If Series: \_\_\_\_\_ # of Episodes \_\_\_\_\_ Total Hours \_\_\_\_\_

Animation \_\_\_\_\_ Total Production Days \_\_\_\_\_ If Episodic: # of Episodes \_\_\_\_\_

## 7. Production Expenditures

Please note: Individual budget information from each production is kept in the strictest confidence.

Please Indicate Currency:  US  Canadian

Total Budget Overall \$ \_\_\_\_\_

Total Budget Spent in BC \$ \_\_\_\_\_

## 8. Producer(s)' Overall Experience

How **satisfied** were the Producer(s) with the pre-production and production services provided by the BC Film Commission?

not at all  1  2  3  4  5 very

Feedback \_\_\_\_\_  
\_\_\_\_\_

How **satisfied** were the Producers with their overall production experience in BC?

not at all  1  2  3  4  5 very

Feedback \_\_\_\_\_  
\_\_\_\_\_

Completed by \_\_\_\_\_

Once completed, please submit by email or fax this form to the BC Film Commission at (604) 660-4790.

**Thanks for your support!**