REIMBURSEMENT AFFIDAVIT TO ACCOMPANY SNOWBATE EXPENDITURE REPORT

I, _____ (herein after "Affiant") being duly sworn, hereby state as follows on behalf of the Production Company named below:

1. Affiant is an employee and/or owner of the Production Company named _____ (List Full Legal Name of the Production Company). My title is _____, and I am authorized to execute this Affidavit on behalf of the Production Company.

2. This affidavit is submitted in conjunction with the "Snowbate Expenditure Report" in which the Production Company is listing expenses for:

-Personnel as a qualifying expenditure;

-Food and/or catering (line item 12) qualifying expenditures; and

-Per diem qualifying expenditures.

3. I represent and affirm to the best of my knowledge that

-All expenditures for personnel for whom expenses are listed in the "Snowbate Expenditure Report" are residents of the State of Minnesota;

-the Production Company has on file a copy of a valid Minnesota driver's license, ID Card, voter registration card, or equivalent document for each of their personnel listed on the "Snowbate Expenditure Report;"

-no portion of the submitted food and/or catering expense was to pay for alcoholic beverages;

-per diems included in this report are paid to workers for days spent in Minnesota only; and

-all Minnesota production crew, actors and vendors have received payment for the work completed within the certification period and submitted through this "Snowbate Expenditure Report."

4. On behalf of the Production Company, affiant acknowledges and understands that all Snowbate Reimbursement funds received by Production Company are considered taxable income and must be treated accordingly.

5. On behalf of the Production Company, affiant understands and agrees to the Snowbate Terms and Conditions and represents and warrants that all applicable criteria and standards of eligibility are satisfied.

_____
Affiant

STATE OF_____)
) ss.
COUNTY OF _____)

Signed, sworn to, and acknowledged before me by _____, this _____ day of _____, 20____.

Notary Stamp or Seal

_____
Signature of Notary Public