

SCHEDULE 9  
Certified Budget

The undersigned \_\_\_\_\_  
(insert name of Completion Guarantor)

is the Completion Guarantor for \_\_\_\_\_  
(insert name of Production)

being produced by \_\_\_\_\_  
(insert name of Production company)

We certify that the Budget dated \_\_\_\_\_ having a total Production cost (above and below-the-line,  
all amortized and episodic expenses) of \_\_\_\_\_ .  
(insert grand total)

is the Budget approved by us for this Production.

For Series, indicate # of Episodes: \_\_\_\_\_

For co-productions, please complete the following:

The Production titled \_\_\_\_\_

is a co-production. Yes  No

This Budget figure represents the total Production cost, total herein defined as costs incurred by all Producers.  
Yes  No .

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
(Signature of signing officer)

\_\_\_\_\_  
(Print or type name)