



ROGERS-BSO SCRIPT DEVELOPMENT FUND

ATTESTATION FORM

Name of Applicant (“The Applicant”): _____

I, the undersigned (full name of signatory):

DECLARE, that:

I am duly authorized to declare the following:

1. I confirm that I have performed a complete due diligence of all relevant facts for the drafting of this declaration and that I have personal knowledge of said facts;
2. I acknowledge that if I, “the Applicant” provide false information or omit material information in connection with an application, I may be subject to serious consequences.

These may include, among other outcomes:

- Loss of eligibility for future funding
 - Repayment of any funds already advanced
 - Criminal prosecution, in the case of fraud
3. I acknowledge that these measures may be imposed not only on the Applicant but also on related, associated and affiliated companies and individuals (as determined by the CISF at its sole discretion). Any Applicant receiving approval for funding will be required to sign a legally enforceable agreement, which includes further provisions concerning misrepresentations, defaults, and related matters.

AND I HAVE SIGNED

Full Name: _____

Signature: _____

Date: _____

City, Province: _____