COMPLETION REPORT

AGENCY INFORMATION			
Name:		*Report Date:*	
Address:		*Prepared By:*	
		Phone:	
		Email:	

PRODUCTION INFORMATION			
Client:		*Union:*	
Product:		*Production Company:*	
Job Number:		*O/C Film Date & City:*	
Agency Producer:		*VO Record Date & City:*	
Media:		*Singer Record Date & City:*	
Commercial Type:		*Music Record Date & City:*	

COMMERCIAL INFORMATION					
Version:	*Code Number:*	*Title:*	*Length:*	*Editing Provision:*	*AFM Contract:*
1					
2 *(allowable edit)*					
3					
4					
5					

CONTRACT INFORMATION				
First Fixed Cycle:	*MPU:*	*Earliest Expiry:*	*OC Lifted/Integrated From:*	*VO Lifted From:*

MUSIC INFORMATION					
AFM Contract No.:	*Track:*	*On Main Commercial:*	*On Allowable Edit:*	*Music House:*	*Composition Name:*

TALENT INFORMATION						
Name:	*Ethnicity:*	*Version(s):*	*Cat/ Cam:*	*Role:*	*Agent:*	*Compensation/Notes:*

DOWNGRADE/OUTGRADE			
Name:	*Downgrade/Outgrade:*	*Instructions (payment/letter):*	*Comments:*

EXTRAS		
Name:	*Integration Fee?:*	*Comments:*

OTHER ASSETS (STOCK FOOTAGE, LICENSED MUSIC etc.)			
Type:	*Source:*	*Licensing Terms (Dates)*	
		Start:	*End:*

COMMENTS

AUTHORIZED SIGNATURE