## AFFIDAVIT OF PRODUCTION REPRESENTATIVE

STATE OF)
COUNTY OF)
The undersigned affiant,, being first duly sworn, hereby deposes and says:
1. I am over the age of eighteen and have personal knowledge of the facts set forth below.
<ol> <li>I have been designated as the "Production Representative" for</li></ol>
<ol> <li>To the best of my knowledge, the information entered into the Green Production Guide Carbon Calculator in connection with NYC Film Green is a complete and accurate reflection of Participant's environmental data.</li> </ol>
4. To the best of my knowledge, the information provided in the NYC Film Green Application Form in connection with NYC Film Green is complete and accurate.
5. To the best of my knowledge, the information entered into the NYC Film Green Questionnaire in connection with NYC Film Green is complete and accurate.
6. To the best of my knowledge, the information entered into the NYC Film Green Submission Form in connection with NYC Film Green is complete and accurate.
7. Participant has satisfied all of the requirements outlined under the "Core Requirements" category in connection with the NYC Film Green designation program.
8. Participant has completely and accurately indicated the "Electives" requirements satisfied by Participant in connection with the NYC Film Green designation program.
9. Participant has completely and accurately indicated the "Extra Credit" requirements satisfied by Participant in connection with the NYC Film Green designation program.
10. All of the foregoing facts are being provided to the best of my knowledge in reliance upon the information provided to me by the Sustainability Representative.
Executed this day of, 20

STATE OF	)			
СС				
COUNTY OF		)		
appeared satisfactory eviden acknowledged to n	nce to be the individual ne that he/she execute	personally known I whose name is si ed the same in his	_, before me, the undersigned, p to me or proved to me on the b ubscribed to the within instrume s/her capacity, and that by his/he alf of which the individual acted,	asis of ent and er signature
Notary Public				