

Tourism Fund Distribution Guidelines

Application Request Form (1 per event)

1. Organization name:

2. Individual name(s) (name, position, address, phone, email):

3. Total monies being requested:

4. Preferred distribution dates of monies:

5. Event description & date:

6. Other sources of funding for event (if exist) including in-kind:

7. Event projected attendance. If a repeating event, please list the attendance counts from prior years (estimates accepted):

8. Event location:

9. Itemized description of how monies will be used:

10. For revenue generating events, describe how the profits are used or redistributed within the community:

11. Describe the event benefits for the community:

12. Identify other organization(s) that may benefit from the event:

13. Accounting for previous year's Tourism Funds received:

| Date Paid | Vendor/Supplier | Amount Paid | Description of Expenditure |
|-----------|-----------------|-------------|----------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | \$ | |
| | | - | |

Submitted by: _____
Signature

Date: _____