

## **Accommodations Tax Funding Final Report**

You may record information directly on this form or create a separate document for more detailed responses.

PROJECT INFORMATION:
Organization Name:
Project Name:
Contact Name:
PROJECT COMPLETION:
Were you able to complete the project as stated in your original application? Yes $\hfill\square$ No $\hfill\square$
If no, state discrepancies:
PROJECT SUCCESS:
Please share any additional comments regarding the project (e.g., lessons learned, successes, problems encountered, etc.)
PROJECT ATTENDANCE:
Record numbers below. Numbers are to reflect attendance and funds received for projects for both the current and previous periods.
Total budget of event/project:
2023-2024 Budget: 2024-2025 Budget:
Amount funded by City of Travelers Rest A-Tax Grant:
Amount funded from all sources:

Total attendance:
* Total tourists:
* Tourists are generally defined as those who travel at least 50 miles to attend; however, the Committee considers every project/event on a case by cases basis.
METHODS:
Please describe the methods used to capture the attendance data listed above (e.g., license plates, surveys, zip codes from registration data, etc.)
BUDGET:
Amount funded by Travelers Rest A-Tax:
Amount funded by A-Tax from other jurisdictions:
Amount funded from all other sources (grants, sponsors, donations for the project in which you applied for not including A-Tax funds received)
<b>Total Amount of Expenditures</b> (total cost of producing program in which you applied for)
Provide signature of official within organization, verifying accuracy of above statements.
Name:
Title:
Signature:
Signature: Date:/
For questions, please call Shannon Herman, City Administrator at 864.834.8740

City of Travelers Rest, Travelers Rest, SC 29690 Email: <a href="mailto:Shannon@travelersrestsc.com">Shannon@travelersrestsc.com</a>