



Olympic Peninsula Visitor Bureau  
PO Box 670 • 618 S. Peabody St. Suite F  
Port Angeles, WA 98362  
360-452-8552 • [director@OlympicPeninsula.org](mailto:director@OlympicPeninsula.org)

**Clallam County Tourism Enhancement Grant 2020 – Part 1 of 2 Recap.**

The 2020 Grant Reimbursement Request must be completed and turned in within 45 days following completion of the project/event.

Project/Event \_\_\_\_\_

Project/Event Director \_\_\_\_\_ Phone \_\_\_\_\_

Completion Date of Project/Event \_\_\_\_\_

Submitting Organization Name \_\_\_\_\_

Submitting Organization Address \_\_\_\_\_

To whom should checks be made out to within your organization? \_\_\_\_\_

Amount of Approved Grant Request \_\_\_\_\_ Amount of Reimbursement Request \_\_\_\_\_

**Include the following information:**

1. Director’s narrative up to 500 words of the event/project detail, process and evaluation.
2. Final Budget including income and expenses.
3. In compliance with ESHB 1253 (Washington Law, 2013): The Grant Reimbursement Request, Parts 1 and 2, needs to be completed and turned in **within 45 days** following completion of the project/event. Recap **must include**:
  - a. Overview of project or event budget, including revenues/expenses
  - b. Descriptions of how the event/project increased overnight stays by providing the following to the best of your ability:
    1. Number of attendees/participants (overall, see second page)
    2. Number of tourists who traveled more than 50 miles for the event/activity
    3. Number of overnight tourists who stayed in paid accommodations
    4. Number of overnight tourists who stayed in non-paid accommodations (i.e. stayed with friends or family)
    5. Number of attendees/participants from another country or state
    6. Number of paid lodging room nights generated from the event/activity
    7. Descriptions of the methodology used to determine all calculations.

The project/event as named above has been completed.

\_\_\_\_\_  
Signature –Project/Event Director

\_\_\_\_\_  
Date

**Mail/deliver completed submission form and receipts to:**

OPVB, PO Box 670, Port Angeles, WA 98362. (618 S. Peabody St. Suite F, Port Angeles, WA 98362)  
Call the OPVB office at 360-452-8552 or email [director@olympicpeninsula.org](mailto:director@olympicpeninsula.org) with any questions.

## Attendance Information

Overall Attendance	Predicted: Actual (Estimated): Method: Please Explain:	Additional Comments:
Attendance, 50+ Miles	Predicted: Actual (Estimated): Method: Please Explain:	Additional Comments:
Attendance, Out of State/ Out of Country	Predicted: Actual (Estimated): Method: Please Explain:	Additional Comments:
Attendance, Paid for Overnight Lodging	Predicted: Actual (Estimated): Method: Please Explain:	Additional Comments:
Attendance, Did Not Pay for Overnight Lodging	Predicted: Actual (Estimated): Method: Please Explain:	Additional Comments:
Paid Lodging Nights	Predicted: Actual (Estimated): Method: Please Explain:	Additional Comments: