



Olympic Peninsula Visitor Bureau
 PO Box 670
 618 S. Peabody St. Suite F
 Port Angeles, WA 98362
 360-452-8552
 director@OlympicPeninsula.org

Clallam County Tourism Enhancement Grant 2021 – Part 2 of 2 Bill Submission

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 _____

Type(s) of reimbursement _____
 (such as ad, print material, web site, facility, etc.)

Target Market (geographic area, age demographic, niche) _____

List below ALL granting organizations and amounts billed:

Organization	Amount Billed	Contact Information
1.		
2.		
3.		
4.		

Attach another sheet with information if necessary.

Include all documentation of expenses:

1. Ads - Print/Radio

- Publication name/radio station(s)
- Date of publication
- Copy of ad (or if radio, an audio email sent to info@olympicpeninsula.org or script of radio advertisement)
- Invoice/Payment receipt

2. Print Material

- Type of print material
- Copy of material
- Invoice/payment receipt
- Distribution details
- Distribution schedule

3. Web Site(s)

- URL
- Copy of page(s) including lodging link and information
- Invoice/payment receipt

4. Facility

- Description of expenses
- Invoice/payment receipt

5. For all other expenses

- Description of expenses
- Copies of material, if applicable
- Distribution
- Invoice/payment receipts

These expenses have been reviewed and are in accordance with the criteria and conditions of the Tourism Enhancement Grant awarded this project/event.

Signature – Project/Event Director _____

Date _____