



Tourist Asset Development (TAD) Application for Grant Reimbursement

Event Sponsor requesting reimbursement: _____

Request must be received **within 60 days** after event completion. All items included must be previously approved by the governing body. Payment will only made to Event Sponsor.

Contact Person/Phone Number(s): _____

Mailing Address: _____

Email/Website: _____

*The project specified in the grant application with the TAD application program was completed on (Date: _____). If applicant spends more/less than anticipated during production/completion of the event, reimbursement will only include the actual expenditures that are **LESS OR EQUAL** to the requested amount. The Town of Dubois will make **ONE** reimbursement to the event applicant. Applicant is to submit all invoices together with a notation that all invoices requested to be paid have been submitted. The Grant is considered closed upon payment.*

Required Information:

- 1) _____ **FINAL NARRATIVE REPORT** (Include: Success of Project, attendance records, how long this project will require outside funding, etc.).
- 2) _____ **COPIES OF ALL PAID INVOICES** (Include itemized expenditure record)
- 3) _____ **COPY OF EACH COMPLETED PUBLICATION/BROCHURES.**

CLAIMANT REQUEST

TOTAL EXPENSES (Please include all invoices) \$ _____

APPROVED BUDGET (Please refer to approved grant application) \$ _____

I certify, under penalty of perjury, that the final report and its attachments are correct and just in all respects.

Signature (Event Sponsor) _____ **Date** _____