**Tourism Sales & Marketing Grant Final Project Report**

**Due Date:** No later than 45 days after completion of the project.

**Organization Name:**

**Submitted By:**

**Project Completion Date:**

**Date Submitted:**

1. **Was the project successful? Why or why not. Please refer back to question one on your application.**
2. **Were there surprises, good or bad, that arose during the project? How did these affect your timeline?**
3. **Did your project come in over or under budget? If so, why?**

**Please outline project expenses below. You will also need to submit (a) copies of paid invoices and (b) cancelled checks showing payment for reimbursement, an (c) invoice to CAEDC for your grant amount and, (d) if applicable, copies of printed collateral, photo of completed sign, photography or video files.**

|  |
| --- |
| **Project Funding** |
| **Funding Sources** | **Amount from Application** | **Actual Amount** | **Notes** |
| CAEDC Grant Funds | $ |  |  |
| Your Organization’s Cash Match | $ |  |  |
| In-Kind Match | $ |  | \_\_\_\_\_ hours @ $\_\_\_\_\_/hr |
| Other Funding Source\* | $ |  |  |
|  |  |  |  |
| **Total Project Revenue** | **$** | **$** |  |

|  |
| --- |
| **Project Expenses** |
| **Expenses** | **Amount from Application** | **Actual Amount** | **Notes** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
|  |  |  |  |
| **Total Project Expenses** | **$** | **$** |  |