



Description of Expense	Vendor Name	Vendor Invoice #	Invoice Date	Invoice Amount	Invoice Amount Paid	Proof of Payment (ex. Check #)	Attachments (briefly list below and attach)
EX: 1/3 page, 4c ad; Jan 21 Southern Living	Southern Living	12345	3/12/21	\$3,457.56	\$3,457.56	5432	Tear sheet; copy of invoice; copy of check

<b>Total Amount of this Reimbursement Request</b>	<b>\$</b>
<b>Requested Visit SoSi Tourism Program Reimbursement (see note below)</b>	<b>\$</b>

**Note:**

- **Form W-9 must be included with the reimbursement request. Please be sure that the W-9 address, and the reimbursement request form address are the same.**
- All requests for reimbursements must be detailed on this sheet.
- Copies of the vendor invoice showing amount of invoice, date, and purpose of invoice must be attached.
- Copies of proof of payment of the invoice must be attached. Proof of payment includes copies of cancelled checks, bank statements showing payment of the invoice, electronic transfer payment confirmations, etc.
- Copies or actual proof of ad placements, production of items (brochures, media kits, etc.), screen capture of live websites, etc., must be detailed in the Attachments column, and attached as part of this form.
- Reimbursements will be issued in the name of the lead applicant and sent to the address indicated on this form.
- Please allow 30 days from the receipt of this reimbursement request by Danville Office of Economic Development & Tourism for the processing of the reimbursement request.
- Failure to incorporate Visit SoSi and the City of Danville branding in your marketing plan, including not displaying the Visit SoSi and City of Danville logo, may result in reimbursement requests being denied.

**Please return the completed sheet, along with supporting documentation to:**

Visit SoSi Tourism Sponsorship Program  
 Lisa Meriwether, Tourism Manager  
 Danville Office Economic Development & Tourism  
 427 Patton Street  
 Danville, VA 24541  
 434-793-1753