TOURISM MARKETING GRANT PROGRAM
FINAL REPORT

Grant Recipient Organization: __________________________________________

Project Contact Name: ________________________________________________

PART I.
Activity Summary:

Please attach a detailed summary of the completed grant project. If the project is an attraction, include the date the completed grant project will be open or available to the traveler. Include what influence, to date, the project has had on visitor count or increase in visitors to the community.

PART II.
Total Funds Spent:

<table>
<thead>
<tr>
<th>Funds</th>
<th>Budgeted</th>
<th>Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leveraged – Cash</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Leveraged – In-kind</td>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>Grant</td>
<td>$________</td>
<td>$________</td>
</tr>
</tbody>
</table>

CERTIFICATION:

I HEREBY CERTIFY THAT THE INFORMATION REPORTED ABOVE IS CORRECT.

SIGNATURE: ________________________ TITLE: __________________ DATE: ____________

Kansas Tourism
Tourism Marketing Grant Program
1000 SW Jackson St STE 100, Topeka, KS 66612