

Albany County Tourism Board Grant Reporting Form

Project Report & Evaluation Form

(To be filled out and returned within 60 days of completion of the project)

Organization:				
Event Start Date:Event End Date:				
Number of estimated out-of-town visitors:	Actual:			
Estimated number of room nights:	Actual:			
Reasons for increase or decrease:				
What marketing promotions worked well? Why?				
What marketing promotions did not work well? V	Vhy?			

Was the event promoted locally, regionally, locally and regionally, or other? Please select all that apply.



Did you meet your budget for t	he even	t?			
Submit copies/photos of all mat were promoted.	terials o	n which	the ACTB logo, 800 number, websit	te, broc	hures
	YES	NO		YES	NO
Event stationery			Link on your website		
Event registration forms			Posters		
Newspaper ads (identify papers)			Billboards (locations)		
Magazine ads (identify magazines)			Public announcements at event		
Television ads (identify stations)			Reader board recognition at event		
Radio ads (identify stations)			Banner at event site If yes: CACVB will provide banner Date picked up by you: Date returned to CACVB:		
Ad in event program If yes: Size of ad: Date ad due to you:			Other:		
Brochures			Other:		



Submit $\underline{receipts}$ for purchased items and $\underline{copies/photos}$ of all materials on which the ACTB was recognized as a sponsor

	Event Stationery (copy)
	Event Registration Forms (copy)
	Entertainment at Event (receipt)
	Speakers/Presenters at Event (receipt)
	Rental Equipment for Event (receipt)
	Event Space Rental (receipt)
	Event Programs (copy)
	On-site Event Brochures (copy)
	On-site Event Posters (copy)
	Refreshments (food and/or non-alcoholic beverages) at Event (receipt)
	Public Announcements at Event (copy of script)
	Reader Board Recognition at Event (photo)
	Banner at Event (photo)
	Table Tents at Event (photo)
	Other (please specify)
Sign	nature of Project Manager: Date: