



Event Name:

Amount Requested:

Date(s) of Event:

Submitted by:

MOBILE COUNTY MARKETING FUND APPLICATION REQUEST



Please select one of the following entities to file your request (1-3 below). Applications must be submitted 60 days prior to event. Include this checklist with your submission and include ALL requested information. Failure to include the necessary requirements will result in your application being returned.

1. Checklist for For-Profit Events/Community Organizations/Non-profit entities/Sporting Events

- 1. Charter, Articles of Incorporation, By-Laws, Proof of Current Status, i.e., Annual Report on file with the Secretary of State.
- 2. List of current officers and board members, indicating terms, etc. What company do the current officers/board members work for and occupation.
- 3. Copy of financial statement for the most recently completed fiscal year.
- 4. List of sponsors with financial and in-kind sponsorship listed.
- 5. Event Marketing Plan. Submit a complete schedule of marketing initiatives.
- 6. Event Budget. Submit a copy of the Event Budget for the previous 2 years. If this is a first-time event, this requirement is waived.
- 7. Does this organization have any outstanding balances owed from previous events?
Yes No . If Yes, please include a balance sheet of outstanding balances.
- 8. Does this organization have any pending litigation? Yes No . If yes, please give a detailed synopsis.

2. Checklist for Government Entities

- 1. Letter from the chief elected official stating Government Agency's approval/knowledge of application.
- 2. List of current officers and board members, indicating terms, etc. What company do the current officers/board members work for and occupation.
- 3. Copy of financial statement for the most recently completed fiscal year.
- 4. List of sponsors with financial and in-kind sponsorship listed.
- 5. Event Marketing Plan. Submit a complete schedule of marketing initiatives.
- 6. Event Budget. Submit a copy of the Event Budget for the previous 2 years. If this is a first-time event, this requirement is waived.
- 7. Does this organization have any outstanding balances owed from previous events?
Yes No . If Yes, please include a balance sheet of outstanding balances.
- 8. Does this organization have any pending litigation? Yes No . If yes, please give a detailed synopsis.

3. Checklist for Convention Groups:

- 1. Hotel Information
- 2. Meeting space requirements
- 3. Convention History
- 4. Competition

FUNDS CANNOT BE USED FOR:

1. Annual operating expenditures of the organization.
2. Salaries of full-time staff or supplements for salaries of existing staff; employment of personnel not directly related to the event.
3. Real property.
4. Capital improvements, including but not limited to new construction, renovation, restoration and installation or replacement of fixtures.
5. Tangible personal property, including but not limited to office furnishings or equipment, permanent collections or individual pieces of art.
6. Interest or reduction of deficits or loans. Expenses incurred or obligated prior to or after funding period.
7. Making payments or reimbursements for goods or services purchased for previous or other events.

FUNDING APPLICATION

Directions for filing:

- Applicants are required to submit an electronic copy of the completed Application Packet and email to Cheryl Smith at Visit Mobile, csmith@mobile.org for consideration followed by recommendation from the Mobile County Marketing Fund.
- The Application Packet shall consist of all the items listed under the checklist for your selected entity.
- Applications must be submitted at least **sixty (60) days prior** to the event to be considered for approval of fund disbursement. Please read the application thoroughly before completing. Incomplete applications will be returned.

FUNDING GUIDELINES

- For approved funding, the applicant is required sign a Letter of Agreement, complete a Form W-9 Request for Taxpayer Identification and Certification, and submit an invoice for the amount awarded.
- Please note that 75% of the funds will be disbursed prior to the scheduled event. After the event, the remaining 25% of the funds will be disbursed contingent upon the completion of the Mandatory Recap Form. Special exceptions may be considered by the committee.
- Should the funds get disbursed and the event is cancelled, applicant must return all funds to the Mobile County Marketing Fund account. Special situations may apply. **The Committee will reserve the right to withhold the remaining 25% of funds based upon the room night pickup expectation. If the numbers are less than stated in their application, a lower amount may be awarded.**
- The applicant has up to 60 days after the event to submit a Mandatory Recap Form to collect the remaining 25%. If funds are not collected by that time, funds will be forfeited and returned to the Marketing Fund account.
- **NOTE:** For all applicants awarded funds, it is mandatory to use the Mobile County Logo for any sponsorship items (programs, t-shirts, banners, posters etc.) that the county could be recognized for, as this money awarded is a County lodging tax. The Mobile County Logo will be emailed to you from the Committee Chair along with a requested invoice for processing your check. Mail or email invoice to Cheryl Smith at csmith@mobile.org or PO Box 204, Mobile, AL 36601. Phone: 251-208-2022.

Mobile County Marketing Fund Request Application

Name of Applicant Organization: _____

Name of Event: _____

Date of Event: _____ Number of Attendees: _____

Amount of Request: _____

Brief Description of Event: _____



MARKETING:

Attach Event Marketing Plan

List detailed information of marketing strategy not listed in the attached Marketing Plan.

1.
2.
3.

List any opportunities (posters, banners etc.) pre-determined to display the County logo during your conference/event:

1.
2.
3.

If the full amount of the request cannot be awarded, will you advertise/market outside of the Mobile area?
 Yes No .



HOTEL INFORMATION:

List all hotels to be used:

1.
2.
3.
4.
5.

Room Night Request/Pattern of Room Use (Number of rooms needed per night of event)

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6
Day/Date						
# of Rooms						

Is there a room block already established? Yes No .

Total Hotel Rooms Used: _____ Total Hotel Revenue Generated: _____



MEETING/EVENT SPACE: (List the meeting/event space is being utilized/held and the rental charge if applicable.)

Meeting/Event Space to be used	Rental Amount or Complimentary

~~~~~  
**HISTORY:** (List event/convention information for previous years.)

| Year | Location | Total Room Nights Used |
|------|----------|------------------------|
|      |          |                        |
|      |          |                        |
|      |          |                        |

~~~~~  
COMPETITION: (List other cities are bidding on this business)

Year	City/Location

~~~~~  
**OTHER FUNDING SOURCES:** (List all other sources of funding for this event/convention)

|    |
|----|
| 1. |
| 2. |
| 3. |

~~~~~  
APPLICATION CONTACT:

Contact Person: _____	Title: _____
Email: _____	Federal ID#: _____
Phone Number: _____	Fax: _____
Mailing Address: _____	
STREET	CITY STATE ZIP

Signature of Organization's Contact Person:

_____/_____
 Signature of Contact/ Printed name

Date Submitted: _____

MARKETING FUND REQUEST
MANDATORY RECAP FORM
(POST EVENT FOLLOW-UP)

- In order to receive your 25% balance of approved funding, all Applicants are **required** to submit an electronic copy of the completed Mandatory Recap Form (Post Event Follow-Up) within 60 days after the event. Email to Cheryl Smith at csmith@mobile.org with Visit Mobile. 251-208-2022. **The Committee will reserve the right to withhold the remaining 25% of funds based upon the room night pickup expectation. If the numbers are less than stated in their application, a lower amount may be awarded.**

Event Date: _____ Amount of Approved Funds: _____

Name of Organization: _____

Name of Event: _____ Number of Attendees: _____

HOTEL INFORMATION:

List all Hotels used by attendees in **Mobile**.

1.
2.
3.
4.
5.

Room Night Pick-up/per night for hotels in **Mobile** *****TRN (Total Room Nights):** _____

Night 1	Night 2	Night 3	Night 4	Night 5	Night 6	Night 7

How Was Occupancy Determined? _____

How Was Event Attendance Determined? _____

AWARD INFORMATION: (Provide a complete breakdown of how the awarded funds were dispersed, including your final executed Marketing Plan.) Attach executed Marketing Plan

ADDITIONAL FUNDING SOURCES: (Denote any additional source of funds - i.e., room rebate, etc.)

Submitted by: _____ Title: _____ Date: _____

Phone: _____ Email: _____ **REV 5-25A**