



Grant Program Post Event Report

POLICIES AND PROCEDURES

Prior to disbursing funds to the grant recipient, a Post Event Report must be submitted along with all required documentation. **Post Event Reports must be submitted within 90 days of the conclusion of the event.** To expedite the reimbursement process, please understand the following:

- The Post Event Report must be typed and completed using the form provided.
- Within 90 days after completion of the event, the grantee must forward the Post Event Report that includes actual attendance, out-of-state direct economic impact calculations and accurate accounting of the event's financial activity.
- The Grantee must report the minimum of \$1 million in out-of-state economic impact to receive the final award.
- The Grantee must generate 80% of estimated impact to receive full award, above the minimum \$1 million economic impact. Pro-rated amount of the award will be awarded fewer than 80%.
- Natural Disasters and other incidents that may affect the impact generated by the event will be considered on a case-by-case basis.
- The organization must provide copies of any printed material that contains the Florida Sports Foundation logo. The organization must also provide photographs of any Foundation signage displayed during the event and or an ad used in an event program book.
- **The Foundation will disburse funds as reimbursement for paid invoices only for allowable expenses as outlined below:**

Allowable Expenses:

promotion, marketing, and programming
paid advertising and media buys
production and technical expenses
site fees/costs (contract help, rentals,
insurance)
rights fees, sanction fees, non-monetary
awards
travel (if approved by FSF in advance)

Disallowable Expenses:

general and administrative expenses
building, renovating and/or remodeling
permanent equipment purchases
debts incurred prior to the grant programs,
which solicit advertising
hospitality or social functions

- After review of the Post Event Report, the grant funds will be forwarded to the Grantee, as designated in the Grant Agreement.

Process for Reimbursement:

1. Complete and return the Post Event Report.

2. Submit **invoices** for those approved expenses, as outlined in the Grant Application, totaling the amount granted.
3. Include the copy of the **canceled check (front and back)** and the **corresponding invoice** to backup each check. If more than one check applies to one invoice, please attach a tape showing the addition of the checks on the back of the invoice. If more than one invoice backs-up one check, please attach a tape showing the addition of the invoices on the back of the copied check page.
4. If an advertising expense is submitted for reimbursement, please include all original tear sheets, brochures, or other printed media as applicable.
5. Cash receipts will **not** be accepted for reimbursement.
6. If a credit card is used, a receipt, monthly statement and canceled check must be submitted.
7. The Grantee is to keep all original documents for at least the period of time stipulated in the contract. The Foundation reserves the right to request copies of all registration documentation, etc.
8. Faxed copies of the Post Event Report are not allowed, nor are illegible or hard to read photocopies.
9. All expenses must be proven as paid by the Grantee. No other expenses paid by other entities or individuals are allowed to be used for back up, unless it is proven that the Grantee has reimbursed that entity or individual.

Major and Regional Grant Program
POST EVENT REPORT

I. GRANTEE INFORMATION

1. Organization Name: _____

**(Please note: All grant payments will be made payable and mailed to the GRANTEE named in the Grant Agreement.)*

2. Post Event Report Completed by: _____

Name: _____ Title: _____

Phone: _____ E-mail: _____

II. EVENT INFORMATION

1. Event Title: _____

2. Event Date(s): _____

3. Event Location(s): _____

4. Provide a summary of media exposure for the event (please include copies of any printed promotional materials, television highlights, video documentation, etc.):

III. GRANT AWARD

1. Amount of Grant Award Due Grantee: \$ _____

2. Summary of eligible expenditures for grant reimbursement (appropriate documentation - cancelled checks and invoices must be attached to the Post Event Report):

<u>CHECK #</u>	<u>PAYABLE TO</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Please note: Payment/reimbursement occurs by submitting invoices totaling the amount of the grant award.

IV. ECONOMIC IMPACT

1. Participation Summary:

Total Participants (competitors, coaches, trainers, officials, etc.)

ADULT Out-of-State: _____ In-State: _____

YOUTH Out-of-State: _____ In-State: _____

Total Spectators (fans, family, friends, etc.)

ADULT Out-of-State: _____ **In-State:** _____

YOUTH Out-of-State: _____ **In-State:** _____

Total Media Out-of-State: _____ **In-State:** _____

2. Economic Impact Summary *(should reflect numbers provided in Section IV – 1 – Participation Summary)

Direct Out-of-State Economic Impact of the Event

of out-of-state Adult Participants _____ x avg. length of stay _____ x \$143 = \$ _____

of out-of-state Adult Spectators _____ x avg. length of stay _____ x \$143 = \$ _____

of out-of-state Youth Participants _____ x avg. length of stay _____ x \$72 = \$ _____

of out-of-state Youth Spectators _____ x avg. length of stay _____ x \$72 = \$ _____

of out-of-state Media/Professional _____ x avg. length of stay _____ x \$143 = \$ _____

TOTAL DIRECT OUT-OF-STATE ECONOMIC IMPACT \$ _____

Total Hotel Impact (In-State and Out-of-State):

of Rooms _____ x Avg. # of nights _____ x Avg. Room Rate \$ _____ = \$ _____

Revenue Estimates Generated by Out-of-State Participants/Spectators

State Sales Tax

Direct Out-of-State Economic Impact _____ x .06 = \$ _____

Local Option Sales Tax (if applicable)

Direct Out-of-State Economic Impact _____ x local option sales tax rate _____ =
\$ _____

Transient Lodging Tax/Bed Tax (if applicable)

Total Hotel Impact x lodging/bed tax rate _____ (example .03) = \$ _____

VI. PROJECTED EXPENSES

Please list use of grant funds:

EXPENSES	
REIMBURSEABLE EXPENSES	CASH
TOTAL EXPENSE	

Please note: If a grant is awarded, payment/reimbursement occurs after the event by submitting invoices totaling the amount granted. The following summarizes the allowable/disallowable expenses that may be used for reimbursement.

Allowable Expenses:

promotion, marketing, and programming
 paid advertising and media buys
 production and technical expenses
 site fees/costs (contract help, rentals, insurance)
 rights fees, sanction fees, non-monetary awards
 travel (if approved by FSF in advance)

Disallowable Expenses:

general and administrative expenses
 building, renovating and/or remodeling
 permanent equipment purchases
 debts incurred prior to the grant
 programs, which solicit advertising
 hospitality or social functions

V. SIGNATURE/DISCLAIMER

We, the undersigned, hereby certify that we have read and understand the Post Event Report Policies and Procedures, and attest that all information included with this report is true and accurate:

Authorized Signature, Grantee

Title

Date

Updated: 9/12008