

Pinellas County Tourist Development Council Elite Event Funding Program Post-Event Worksheet FY 2024

Organizer Info	
Organization Name:	
Elite Event Name:	
Certification and Compliance Agre	eement
I hereby certify that the information contains correct to the best of my knowledge.	ed in the Post-Event Worksheet submitted herewith is true and
(Initial <u>each item</u> below in blue ink .)	
which consists of the following Signed/Initialed Post-ExInvoiceW-9Sponsorship Benefits: F	d I must complete and submit a Post-Event Report Packet , to be eligible for final payment: vent Worksheet (this document) Proof of Performance g Plan: Proof of Performance with Summary of Expenses
the conclusion of the event via • One (1) Original / Hard	Report Packet must be submitted to VSPC within 45 days from : Copy Post-Event Report Packet, or the Post-Event Report Packet
	d that Post-Event Reports that are not complete or submitted re, may result in delay or forfeiture of final payment.
	d that I must explain the methodology utilized to determine enerated by the event, upon request by VSPC.
	d that I must explain any discrepancies between information ing Application and the final performance of the event prior to pon request by VSPC.
I certify I am an Authorized Corporate Off of the Elite Event.	icer or an Authorized Individual (if a municipality) on behalf
Authorized By:	Signature:
Title:	Date:
Phone:	
Email:	

Post-Event Worksheet

1. Organization / Contact Information

receipt or proof of pa Vendor	Expense Type	Cost	Invoice Attached	Receipt Attached	
agreed upon in Exhib Provide a summary (oit B of the Tourism Pr	omotion Agreement. eting the following for			
reimbursement. Prod	of of Performance sha	eting & Advertising Pla Il include itemized 3 rd oplain any discrepanci	party invoice(s), red	ceipt(s) or other such	
J. Marketing &	Auvertising Fidil	. FIOOI OI PEIIOII	iialice		
Agreement. Use Exhi	bit A as a template fo	orship Benefits agreed r providing photos and Proof of Perfori	other documentation		
4. Sponsorship	Benefits: Proof o	of Performance			
\$					
Final Contracte	ed Funding Amou	ınt:			
	☐ Category 3	☐ Category	4 Cate	gory 5	
Funding Category:	Category 1 (mus	t be nationally televise	ed) Category	2	
3. Request Sum	mary				
. ,					
Event Location(s): Event Date(s):					
Event Title:					
2. Event Inform	ation				
Office: Email Address:	Mobile	e: 	Fax:		
Primary Contact Nar			Fave		
City:	State		Zip:	Zip:	
	is:				
Organization Addres					

6. Final Invoice & W-9

Provide and attach your final invoice and completed W-9.

7. Post-Event Requirements & Instructions

A fully completed Post-Event Report Packet consists of:

- 1. Signed/Initialed Post-Event Worksheet (this document)
- 2. Invoice
- 3. W-9
- 4. Sponsorship Benefits: Proof of Performance
- 5. Marketing & Advertising Plan: Proof of Performance with Summary of Expenses

Within 45 days from the conclusion of the event, your Post-Event Report Packet must be emailed (digital copy) or mailed (hard copy) to:

Craig Campbell
Director, Community & Brand Engagement
Visit St. Pete Clearwater
8200 Bryan Dairy Road, Suite 200
Largo, FL 33777
Craig@VisitSPC.com
(727) 464-7254