

Special Events/Tourism Grant Final Report

Reports to GAEDA are in association with your approved grant or Cooperative Endeavor Agreement. Please refer to the signed Cooperative Endeavor Agreement between your organization and GAEDA for due dates and the guidelines below for specific details regarding submission of reports.



Reporting Guidelines

Reports to GAEDA are in association with your approved grant or Cooperative Endeavor Agreement. Please refer to the signed Cooperative Endeavor Agreement between your organization and GAEDA for due dates and the guidelines below for specific details regarding submission of reports.

- 1. The **Hotel Nights(s) Confirmation Form** provides required information about the total number of hotel/motel rooms occupied in Alexandria by Event participants and their guests.
- 2. The **Vendor Verification Form** provides required information about vendor payments. Invoices are also required.
- 3. Revenues and Expenditures an accounting of income vs expenses for the funded Event.
- **4.** The **Final Report** is an after-action report. It provides required information about revenues, expenditures, the purpose of the event, and lessons learned.
- 5. Submitting reports:
 - a. Mailed to the GAEDA office, 315 Bolton Avenue, Alexandria, LA 71301
 - b. Emailed to Angela Varnado, avarnado@gaeda.org
 - c. **Faxed** to Angela Varnado, 318.625.7599
 - d. Hand delivered to the GAEDA office, 315 Bolton Avenue, Alexandria, LA 71301
- 6. **Due dates:** all final reports must be submitted **within thirty (30) days of the funded Event**. Failure to do so may result in denial of future funding. If you have questions or concerns, contact Angela Varnado, Executive Director, avarnado@gaeda.org, or 318.880.0407.



Hotel Night(s) Confirmation Form

It is the responsibility of the grantee to complete this form and return it, along with the Vendor Verification Form, and the Final Report, within thirty (30) days of the funded Event. Failure to do so may result in denial of future funding. If you have questions or concerns, contact Angela Varnado, Executive Director, avarnado@gaeda.org, or 318.880.0407.

| Name of Grantee: | | | | | |
|--------------------------------------|-----------|-----------------------|-----------------------------|-----------------------|------------------------|
| Name of Project Manager: | | | | | |
| Email address: | | | | | |
| Phone number: | | | | | |
| Name of Hotel(s) | | Room block? Y/N | Number of Room Nights | Number of Rooms | Number of People |
| | | | | | |
| | | | | | |
| | | | | | |
| | | - | | | |
| | | | | | |
| | | | | | |
| Arrival Date(s) | | | | | |
| Departure Date | | | | | |
| | | | | | |
| Hotel Representative/Title (printed) | Signature | | | Da | te |
| Project Manager (printed) | Signature | | | Da | te |
| Organization Director (printed) | Signature | | | | te |



Vendor Verification Form

It is the responsibility of the grantee to complete this form and return it, along with the Data Reporting Form, and the Final Report, within thirty (30) days of the funded Event. Failure to do so may result in denial of future funding. If you have questions or concerns, contact Angela Varnado, Executive Director, avarnado@gaeda.org, or 318.880.0407.

| Please note: paid invoices must accom | pany this form. | | | |
|---------------------------------------|-----------------|-------------------------|--------------|----------------------------|
| Name of Grantee: | | | | |
| Name of Project Manager: | | | | |
| Email address: | | | | |
| Phone number: | | | | |
| Name of Vo | endor | Invoice Paid? Y/N | Amount paid? | Invoice attached Y/N |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Project Manager (printed) | Signature | | Da | ate |
| Organization Director (printed) | Signature | | | ate |



Revenues v. Expenditures

Must be submitted with the Final Report

Revenues Edit line items as needed

| Ticket Sales | |
|---------------|--|
| Entry Fees | |
| T-shirt Sales | |
| Other | |
| Other | |

Total Project Revenues

Expenditures Edit line items as needed

Advertisement/Publicity/Promotions

| Posters | |
|-------------|--|
| Flyers | |
| Push Cards | |
| Radio | |
| TV | |
| Newspapers | |
| Billboards | |
| Direct Mail | |
| Websites | |
| T-Shirts | |

Subtotal

Event/Program Costs

| Transportation - event related non-personal | |
|---|--|
| Entertainment - event related non-personal | |
| Food Services - event related non-personal | |
| Facility Rental | |
| Decorations | |
| Props | |
| Sound and Lights | |
| PowerPoint Audio/Visual | |
| Security | |
| Miscellaneous | |
| | |

Subtotal

Operational Support

| Telephone | |
|--------------------------------|--|
| Postage/Shipping | |
| Printing/Duplication of copies | |
| Supplies | |

Subtotal

TOTAL PROJECT EXPENSES

| Person completing this budget: _ | |
|----------------------------------|--|
| Date: | |

Formulas are not guartanteed. Please check carefully prior to submission.



Final Report

It is the responsibility of the grantee to complete this form and return it, along with the Data Reporting Form, and the Vendor Verification Form, within thirty (30) days of the funded Event. Failure to do so may result in denial of future funding. If you have questions or concerns, contact Angela Varnado, Executive Director, avarnado@gaeda.org, or 318.880.0407.

| Name of Grantee: | |
|--------------------------|--|
| Name of Project Manager: | |
| Email address: | |
| Phone number: | |

Please answer each question in a narrative format.

- 1. Intentions for this project/Event:
 - a. What was the purpose and scope?
 - b. Were your objectives/outcomes met? Why or why not?
 - c. How did the community respond to your Event?
- 2. Partnerships and sponsors:
 - a. Describe the collaboration with your partners and sponsors.
 - b. Did your partnerships work as envisioned?
- 3. Successes and challenges:
 - a. What worked well and why?
- 4. What didn't work well and why?
- 5. Lessons learned:
 - a. What can be improved for next time?
 - b. Provide recommendations for improvement.
- 6. Other information:
 - a. Explain how you acknowledged GAEDA's support for this Event.
 - b. List any media coverage your Event received.



Final Report Signature Page

| Project Manager (printed) | Signature | Date | |
|---------------------------------|-----------|------|--|
| | | | |
| Organization Director (printed) | Signature | Date | |

If you have any questions regarding the content of this report or its submission, please contact Angela Varnado, Executive Director, avarnado@gaeda.org, or 318.880.0407.