

**CITY OF GEORGETOWN  
ACCOMMODATIONS & HOSPITALITY TAX FUNDING**

**PROJECT EVALUATION**

Must be completed and returned within 45 days of project's completion

**Project :** \_\_\_\_\_

**Applicant:** \_\_\_\_\_

**Date of Project:** \_\_\_\_\_

**Total Attendance:** \_\_\_\_\_

**Number of Tourist:** \_\_\_\_\_

**1. Project Evaluation :**

a. Summarize the funded activity. How did the project help attract or provide for tourists? For continuing activities, what changes do you plan on implementing that could strengthen or improve activities?

b. Describe publicity or promotional efforts.

c. Document the method used to determine total attendance and number of tourist that attended the event.

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2. Financial Profile - Project Evaluation Form: Complete "Project Budget" (Column A) & "Project Actual" (Column B) listing ONLY ATAX/HTAX expenditures incurred for the project. Documentation (invoices and checks) must be attached, if not previously submitted, for all ATAX/HTAX funded expenditures.

Note: The award is not closed until this form and the Financial Profile form along with supporting documentation (invoices/checks) have been submitted.

**I certify that all information and attachments in this report are true and correct, and that the City's accommodations and/or hospitality tax funds received were applied against the project's tourism-related expenditure as described in the grant application in accordance with both City guidelines and State laws.**

<b>Signature of Administrative Official</b>	<b>Print Name &amp; Title</b>	<b>Date</b>
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RETURN TO :           City of Georgetown  
                          Attn: Finance  
                          PO Drawer 939  
                          Georgetown, SC 29442

**Project Evaluation Check List**

<input type="checkbox"/>	#1 Project Evaluation Summary
<input type="checkbox"/>	#2 COLUMN A & B Financial Profile
<input type="checkbox"/>	Sign Project Evaluation Form