



Grant Program

Policies and Application

Approved

by the

**Campbell County Lodging Tax
Joint Powers Board**

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I. Introduction and Definition

The Campbell County Convention and Visitors Bureau (CCCVB) is governed by the Campbell County Lodging Tax Joint Powers Board. This Board is made up of tourism industry professionals and others, appointed by the City, County and Town of Wright Municipal Officials. The CCCVB administers funds collected from a County lodging tax on occupied transient lodging sales, i.e. hotels/motels and campgrounds. The funds are designated to promote Campbell County as a visitor destination with emphasis in the following markets: leisure & group travel, meetings and conventions, special events, cultural activities and sporting events.

The CCCVB allocates funds from its annual budget to a grant program for groups and organizations that coordinate events with a demonstrated history of visitor impact or significant potential to draw visitors to the area. The grant fund is administered by the CCCVB with the approval of the Campbell County Lodging Tax Joint Powers Board.

A “Special Event” shall be defined as a “new or existing organized festival, fair, conference, meeting, or sports exhibition, which is conducted according to a pre-arranged schedule, and in which general public interest is manifested. For the purpose of this grant program, the public interest should extend to Campbell County residents and to those living outside Campbell County who would consider visiting and staying overnight to observe or participate.” A “Special Event” must generate visitations to Campbell County that includes overnight stays within the commercial lodging and campground industries.

The program, project or special event must be in direct correlation with the CCCVB’s mission statement which is **“The mission of the Campbell County Convention & Visitors Bureau is to promote and provide monumental experiences for all visitors to Campbell County”**.

Each application will be evaluated against established criteria. The number and extent of these grants will be dependent upon the availability of designated funds and specific allocations. Ideally, the funds allocated by the CCCVB for programs, projects or special events will eventually be returned through an increase in transient lodging sales, thus generating additional lodging and sales tax revenues, and/or economic impact to the community.

II. Statement of Policies

- A. Grant funds are intended to supplement the sponsoring organization’s budget.
- B. Funding is intended to generate media exposure, support marketing and promotional efforts, venue/site rentals, travel expenses to trade shows, costs associated with production and technical expenses or visiting artists and/or exhibits.
- C. Grant applications will be reviewed (4) four times per year, at the monthly Joint Powers Lodging Tax Board meetings in March, June, September and December, unless there are extenuating circumstances. In the event that a grant application is received outside of the CCCVB’s designated submission dates and grant funds are still available in the budget, the Joint Powers Lodging Tax Board may elect to consider the request following a super majority vote (majority plus one) of the Board.
- D. Hotels secured for an event must be located within Campbell County, and must meet the participation requirements*. *Lodging partner participation requirements include: Positive Guest Feedback regarding Customer Service, fulfilling room blocks and rates as previously committed on Event RFP’s. Event producers will provide survey feedback on the hotels from the CCCVB Grant Post Event Report. Grant recipients must allow the CCCVB to send an RFP request to all lodging properties, giving them the opportunity to bid on the granted event. The Grant Recipient will be provided the bid information to decide on the appropriate lodging facility(ies) and will inform the CCCVB for room night tracking purposes. In addition to the hotels, Event Planners/Coordinators of Grant-Awarded activities and events will be required to evaluate the venue(s), any Food and Beverage outlets utilized, the Campbell County Convention & Visitors Bureau, and Transportation or Tours and Attractions, and any other services utilized during the

event. (See Post Event Report, pages 13-xx). The CCCVB will compile the feedback from the Post Event Surveys and will include the lodging property and any other related information with future RFP reports that are provided to the clients. Lodging properties will be required to provide the actual room pick-up reports on grant-awarded events to the CCCVB for the Post Event Reports.

- E. Funding shall be provided as reimbursement for approved actual expenditures upon completion of the event. Proof of payment must be provided. Proof of payment may be submitted in the form of a vendor invoice/receipt and a copy of the cleared check or credit card receipt. Cash receipts will not be accepted without written confirmation from vendor that expenditure has been paid in full.
- F. Under special circumstances, upfront funding may be petitioned for at a monthly board meeting, for up to 50% of the total grant approved, until the first day of the event. The remaining 50% will be provided as reimbursement for approved actual expenditures upon completion of the event, and submission of the completed Post Event Report and Survey.
- G. To be eligible for payment, a completed Post Event Report and Survey must be submitted including tracking statistics regarding out-of-town visitors and their impact on transient lodging facilities and occupancy. Failure to submit a complete Post Event Report will result in disqualification for support. If the event occurs near the end of the CCCVB's fiscal year, final receipts for reimbursement must be received before the fiscal year audit of the CCCVB financials, or the grant funds will be considered forfeited by the organization.

OR

- H. Funding shall be provided as reimbursement for approved actual expenditures upon completion of the event. Proof of payment must be provided. Proof of payment may be submitted in the form of a vendor invoice/receipt and/or a copy of the cleared check or credit card receipt. Cash receipts will not be accepted without written confirmation from vendor that expenditure has been paid in full.
- I. To be eligible for complete payment, a completed Post Event Report must be submitted including tracking statistics regarding out-of-town visitors and their impact on transient lodging facilities and occupancy. Failure to submit a complete Post Event Report will result in disqualification for support. If the event occurs near the end of the CCCVB's fiscal year, final receipts for reimbursement must be received before the fiscal year audit of the CCCVB financials, or the grant funds will be considered forfeited by the organization.
- J. Any funds granted will be subject to audit by the CCCVB's auditor.
- K. Recognition of the CCCVB grant/sponsorship must be included where appropriate on all printed material, electronic media, the organization's web site and referred to in public relation activities. A CCCVB logo will be provided. All printed materials with the CCCVB's logo must be presented with the Post Report. Failure to include the logo can be cause for disallowing reimbursement of the grant funds. In order to be able to utilize the CCCVB logo on marketing materials for the event, the application must be received and go through the approval process **prior to the event start date**, and early enough to include the CCCVB logo on materials. The CCCVB can also provide a 3' X 5' banner to be displayed at the event, if appropriate.
- L. Allowable expenses shall include the following: Promotion, marketing and programming expenses, paid advertising that reaches beyond Campbell County with potential to drive overnight visitations, media buys, production and technical expenses, site fees/costs, speaker fees, and/or travel expenses to trade shows. Should funds be used for the purchase of equipment the CCCVB will be granted priority usage should they host a future event that would require said equipment. An Equipment Addendum will also need to be completed, which shall include a complete description of the equipment, including asset numbers, where the equipment will be stored, and the contact for accessing the equipment for future use. The CCCVB Sales

and Event Coordinator will maintain a full equipment log for those purchases made with CCCVB Grant funds. The application requires all applicants to describe how the grant funds will be used. Any changes to the items submitted **MUST** be presented in writing to the CCCVB for approval.

- M. Unallowable expenses include: General and administrative/labor expenses, building construction, renovating and/or remodeling expenses, debts incurred prior to grant requests that are unrelated to the current event grant request, and hospitality or social functions that include the serving of alcoholic beverages.

III. Funding Eligibility

The intent of the Grant Funding Program is to provide funding assistance for programs, projects and special events that attract overnight visitors to Campbell County impacting the commercial lodging and campground industries, restaurants, retail establishments and other businesses. To be considered for funding, the following criteria have been established:

1. Grant Funding Application must be filled out completely.
 2. Each application must include a signed Certification and Compliance Page.
 3. Applicant must provide a budget.
 4. The Grant Funding Request must positively impact the economy in Campbell County.
-

IV. Rating Criteria and Process

Each grant application will be reviewed by CCCVB staff to ensure that all required materials have been supplied. Failure to supply all the required materials will result in disqualification. Following staff review, the scored applications will be presented to the Campbell County Lodging Tax Joint Powers Board for approval and funding level. The CCCVB staff will score each application on a 50-point scale based on the following:

		Score	Notes
Tourism Development	<ul style="list-style-type: none"> •Request has potential or previously proven ability to generate visitation to Campbell County that includes overnight stays in commercial lodging and campground facilities: (1 point each level) <ul style="list-style-type: none"> - 1 to 100 Room Nights - 101 to 200 Room Nights - 201 to 300 Room Nights - 301 to 450 Room Nights - 451 and over Room Nights •Request contributes to overall appeal of Campbell County as a preferred visitor destination through its program, project or event offerings. •Request has the ability to generate sales tax dollars/economic impact: (1 point each) <ul style="list-style-type: none"> - Catered group meals and/or dining out, grocery purchases - Entertainment/Tour Fees - Shopping/retail purchases or rentals - Venue rental fees - Fuel/transportation purchases •Request is descriptive and clearly defines target market(s). •Request fills non-peak time periods. 	25 Points	
Program/ Project or Event Evaluation	<ul style="list-style-type: none"> •Request supports CCCVB's & organization's mission. •Request goals, objectives, budget and funding sources seem realistic. •Funds requested meet grant criteria of allowable expenses. •Request includes plan for overnight lodging industry stays. •Request includes method for documenting and evaluating outcome of event. 	25 Points	
		Total Possible Points: 50	

V. Grant Request Funding Levels

The following table reflects the level of funding possible based on the grant application's estimated number of room nights. Average Funding levels range from \$0 to a maximum of \$3,500. The estimated number of room nights does not guarantee the level of funding at which the request may be approved. The final funding recommendations will be based on the Board's discretion and available funding levels. As an example, if the Board believes the event has overstated the potential room nights, the Board has the right to place the application in a lower funding category.

Total Points Score	Funding Range
46 to 50	\$2,500 to \$3,500
41 to 45	\$1,500 to \$2,500
31 to 40	\$500 to \$1,500
Less Than 30	\$ 0 - \$500

The following formula will be used to determine the final grant amounts:

1. The score will be determined for each applicant based on the maximum of 50 points as outlined previously. The chart above is the guideline for the Board to determine the award amount.
2. Also, the Board has the discretion to make increased funding adjustment recommendations to any grant application as warranted.

VII. Post Program, Project or Event Report:

Following the program, project or event, the CCCVB reserves the right to conduct a post-audit of information presented on the Post Report. All lodging accommodations listed will be contacted to confirm the number of room nights generated. **PLEASE NOTE THAT ANY MISLEADING OR FALSE INFORMATION PRESENTED CAN AND WILL ADVERSELY AFFECT FUTURE GRANT AWARDS.**

VIII. Conclusion:

Questions regarding grant process can be answered by CCCVB staff at 307.686.0040.

Please submit the original grant application form and certification and compliance statement to:

Campbell County Convention & Visitors Bureau

Attn: Grants Program

1810 S. Douglas Highway, Suite A, Gillette, WY 82718

**IX. Campbell County Convention & Visitors Bureau
GRANT PROGRAM APPLICATION**

For Office Use Only
Community: _____
Group/Conv: _____
Sports: _____

PLEASE PRINT CLEARLY

Date Submitted: _____

Applicant Information

Organization: _____ Contact Name: _____
 (Name and Event)
 Mailing Address: _____ Telephone/Office: _____
 _____ Cell Phone: _____
 _____ E-mail: _____

**Program/Project or Event Description – Please Add Additional Sheet(s) If Needed
Project/Event Information**

Date(s) of Event: _____ Location: _____ Amount Requested: \$ _____

Non-Profit Organization Yes No

Tax I.D. #:	
or	
Social Security #:	
Tax Exempt – Certificate Required	

This Information Is Required

Do you carry event insurance? Yes No
 If YES, Name of Carrier: _____ Policy Number: _____

Is this a one-time program/project/event or recurring? Yes No
 If recurring, how frequently: _____

Has the Campbell County CVB funded this event in the past?

Yes No

If **YES**, number of times & amount received to date: # _____ \$ _____
 Is event public or private? _____ Public _____ Private

Has venue/facility been secured? Yes No

If so, please list:	
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Has hotel or campground been secured? Yes No

If YES , Please list hotel(s) &/or campground(s)	
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Did the CCCVB send an RFP to all lodging properties? (REQUIRED) Yes No

INFORMATION FOR TOURISM DEVELOPMENT PORTION OF APPLICATION - SCORING 25 POINTS MAX.

Anticipated # of out-of-town overnight visitors

Anticipated # of attendees:

.Anticipated # of Room Nights:

Date	Room Nights (# rooms x # nights)

Room Night History of Event (if applicable):

Dates	Hotel & Contact Name	Room Nights (# rooms x # nights)

How does this event contribute to the overall appeal of Campbell County as a preferred visitor destination?

Please list target markets that program/project or event will impact and how will it be marketed?

INFORMATION FOR EVALUATION PORTION OF APPLICATION - SCORING 25 POINTS MAX.

How does the program/project or event support your organization's mission and the mission of the CCCVB?

Total Projected Budget: \$ _____ Total Projected Revenue: \$ _____
 (Please attach budget with application)

Any income coming from:

Sponsorships:	\$ _____	Other Grants:	\$ _____
Donations:	\$ _____	Admission Fees:	\$ _____

If you are requesting or anticipating receiving funding for this program/project or event from other sources, please list each source and the amount requested/anticipated:

Amount Requested Or Anticipated:	Source:	Amount Received or Date to be Announced:
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____ Total Income/Funding Requested/Anticipated		

Describe how grant funds would be used:

Describe how you will evaluate the outcome of the program/project or special event:

Additional information/comments:

Signature: _____

Date: _____

Title: _____

*Please note that incomplete applications will be returned. Carefully read and follow grant guidelines.

**** Grant Applications will be reviewed four times per year**, the second Thursday of the month at the Campbell County Lodging Tax Joint Powers Board meetings in **March, June, September, and December**. Be sure to submit your requests as early as possible so they may be reviewed on a timely basis.

X. Appendices

CERTIFICATION AND COMPLIANCE STATEMENT

APPLICANT:

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and that I have read the Policies and Procedures of the Campbell County Convention & Visitors Bureau Grants Program and will abide by all legal, financial, and reporting requirements as a condition of receiving grant funds from the CCCVB and Campbell County Lodging Tax Joint Powers Board. Signatures must be **original** in **blue or black ink**.

Name:

Please Print or Type

Organization:

Please Print or Type

(Signature)

(Date)

**Please return the original of the application and
the original signed certification & compliance statement to:**

Campbell County Convention & Visitors Bureau

ATTN: Grants Program

1810 S. Douglas Highway, Suite A

Gillette, WY 82718

CAMPBELL COUNTY CONVENTION & VISITORS BUREAU POST PROGRAM, PROJECT OR EVENT REPORT

To be reimbursed, please submit the following:

1. Valid invoice(s) for allowable expenses. Please submit only enough PAID receipts to reach awarded grant amount.
2. Copy of PAID vendor invoice showing a zero-balance due. Cash receipts will not be accepted without written confirmation from vendor that expenditure has been paid in full. For all media buys, please provide tear sheets, copies of advertisements, schedules and signed station affidavits.
3. Number of visitors calculated listed below.
4. Number of room nights tracked listed below.
5. Copies of marketing or advertising materials, websites showing CCCVB'S logo.

Grant Information

Name of Event:

Date(s) of Event:

Contact/Title:

Address:

City: State: Zip:

Telephone #: () Awarded Grant Amount: \$

Email:

Make Check Payable To: (Please Note – Organization must be same as organization that was awarded grant.)

Tax I.D. or Social Security #:

(This information is required)

EXPENSES TO BE REIMBURSED

Itemized expenses to be reimbursed by CCCVB's grant funds must be allowable and match submitted invoices.

Expense Item	Amount

If more space is required, please use separate sheet

Total: \$ _____

VISITORS

Out-of-town Participants:		Participant = (attendees, athletes, coaches, officials, visiting artists, speakers, production crews)
Visitors:		Visitor = (family + spectators) from out of town.
Event Attendees/Ticket Sales:		May include locals
Total:		Attendees = (participants + out-of-town visitors)

ROOM NIGHTS

To calculate the total number of room nights, multiply number of rooms by the number of nights (i.e.: 5 rooms for 4 nights = 20 room nights)

- Unknown or untracked is not acceptable and request for reimbursement will not be processed.
- Please provide explanation if actual room nights are different than what was reported as anticipated room nights on the grant application.

HOTEL PROPERTY / STREET ADDRESS	ROOM NIGHTS

Please attach any additional information such as participant sign-in sheets or rosters/lists with home-towns to support room nights reported.

MEDIA / MARKETING

Provide summary of media exposure received (local, regional and national print, television, online and radio) as well as examples of promotional materials (brochures, posters, programs, etc.). **Please add additional sheet if needed.**

COMMUNITY EVALUATION

Please rank the following entities and services utilized during your event, and rank from 1 to 10, 10 being high and 1 low:

Hotel/Lodging Accommodations

Please list, and add comments as necessary:

Hotel 1 Name _____ Ranking _____

Hotel 2 Name _____ Ranking _____

Hotel 3 Name _____ Ranking _____

Hotel 4 Name _____ Ranking _____

Hotel 5 Name _____ Ranking _____

Comments:

*Add separate sheet if additional space is needed

Venue Name _____ Ranking _____

Venue Name _____ Ranking _____

Venue Name _____ Ranking _____

Comments:

*Add separate sheet if additional space is needed

Food and Beverage Name _____ Ranking _____

Food and Beverage Name _____ Ranking _____

Food and Beverage Name _____ Ranking _____

Comments:

*Add separate sheet if additional space is needed

Campbell County Convention &

Visitors Bureau Staff/Services Name _____ Ranking _____

Comments:

*Add separate sheet if additional space is needed

Any Tours and/or Attractions Name _____ Ranking _____

Any Tours and/or Attractions Name _____ Ranking _____

Any Tours and/or Attractions Name _____ Ranking _____

Comments:

*Add separate sheet if additional space is needed

Other Services Used Name _____ Ranking _____

Other Services Used Name _____ Ranking _____

Comments:

*Add separate sheet if additional space is needed

How likely are you to recommend the Gillette/Wright/Campbell County area to others? Ranking _____

Please include additional comments you would like to add below:

Please mark YES _____ if you would like a representative from the Campbell County Convention & Visitors Bureau to contact you directly, and the contact information_____.

I certify that the above information is true and accurate to the best of my knowledge.

(Name)_____ (Organization)_____ (Date)_____