CITY OF LACEY
Lodging Tax Advisory Committee
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EHXIBIT C- Lodging Tax Reimbursement Request

Organization Information

Organization Name

Organization DBA

Name of Activities

Funding Year | Quarter

Contact Name

Phone | Email

Reimbursement Requests

Lodging tax funds are reimbursed after eligible expenses are incurred. Reimbursement id limited to the expenses identified in your Scope of Services. You may submit a request for reimbursement:

- **Single Occurrence Activities:** after activities are completed.
- **Multi-Occurrence Activities:** after activities are completed or once a quarter.
- **Annual Activities:** after activities are completed or once a quarter.

Preparatory Marketing Expense Reimbursement

Up to 30% of the award may be reimbursed for marketing expenses incurred prior to activities. This request may be submitted once during the award cycle and should be separate from other requests. Check the box below if you are requesting reimbursement for preparatory marketing expenses.

☐ This request is for Preparatory Marketing Expenses

Items Ineligible for Reimbursement

The following will not be eligible for reimbursement:

- Expenses not identified in the Scope of Services
- Transactions outside the award period
- Prepaid expenses for services or goods the award period
- Transactions not purchased or paid for by the contracted Organization
- Split or partial transactions
    - The total of the transaction must match the total of the payment

Required Documentation

Complete **Table A** on page 3. Each item must be supported by an invoice or receipt and proof of payment. All documentation must include:

- Contracted Organization Name
- Date of Transaction or Payment
- Vendor or Payee Name
- Transaction or Payment Total
- Labeled to match **Table A**

Proof of Payment

Allowable documentation for proof of payment includes:

- Copies of Clear Checks
- Bank Statements
- Credit Cards Statements
- Vendor Activity Listings (Governmental Agencies)

Unacceptable Documentation

The following documentation will not be accepted:

- Records for transactions made via Venmo, PayPal or other payment processing platforms
- Screen shots or photos of documents
- Documents that require password access
- Links to documents on outside platforms

Certification

I hereby state on behalf of the above referenced Organization that the information provided in this report is accurate and correct.

Signature Date

Table A Itemized Request for Reimbursement					
Item	**Date**	**Expense Category**	**Vendor**	**Goods or Services Purchased**	**Amount**
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
				Total Reimbursement Request	0

Expense Categories

- **Promotion & Marketing:** Marketing Services, Advertising (Digital & Print), Graphic Design, Signage, Programming, Visitor Guides, Website Development
- **Administrative:** Insurance, Permits, Licenses, Memberships, Staff, Rent, Utilities
- **Tourism-Related Facilities**: Capital Improvements, Equipment
- **Rentals:** Facility/Space Rentals, Deposits, Tents, Tables, Equipment, Portable Restrooms, Waste Receptacles
- **Expenses:** Entertainers, Vendors, Photographers/Videographers, SWAG, Supplies, Decorative Elements