

Return Reimbursement Form To:
scottcity@scottcityks.org
AND
visitscottcitytourism@gmail.com

**CITY OF SCOTT CITY
TRANSIENT GUEST TAX
REIMBURSEMENT REQUEST**



Sponsoring Organization: _____

Date Submitted: _____ Address for Check to be Mailed _____

Name of Activity: _____

Date(s) of Activity: _____

Reimbursement Amount Requested: _____

Please itemize your complete reimbursement request below (include itemized receipts/invoices for each expenditure):

<u>Vendor</u>	<u>Item</u>	<u>\$ Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

GUIDELINES CHECKLIST:

I acknowledge that I have received a copy of *City of Scott City Transient Guest Tax Application Guidelines*

Please note the number in attendance (if known) _____

Please note the number of vendors (if applicable) _____

Please note the number of overnight stays (if known) _____

Yes No NA - I have attached reimbursement receipts for promotion materials (if applicable) utilizing the services of Scott City businesses.

Yes No NA - I have attached an invoice/receipt for the purchase of Chamber Bucks (if applicable) to be given as cash prizes.

Yes No NA - I have attached any flyers or newspaper ads (with the Scott City Tourism website logo) used in the advertising/marketing of the event.

Yes No NA - I have attached evidence of social media or radio marketing (if applicable) noting the use of Scott City Tourism website logo or mention of the website address (visitscottcity.com)

Failure to demonstrate compliance with the guidelines set forth by the Transient Guest Tax Committee may result in funds being denied in part or in full.

Reimbursement of funds will not be considered until this form is returned with accompanying documentation.

This form is due NO LATER THAN 60 days following the event. Please contact City Hall if there are extenuating circumstances that arise to delay the reimbursement request.

Name/Signature of Representative Submitting Request: _____

Telephone Number: _____ Email Address: _____