Town of Geneva Wisconsin Tourism Promotional Grant Reimbursement Form

Email all pages of this form, marketing materials and Post Event Report to both: tourism@townofgeneva.wi.gov and clerk@townofgeneva.wi.gov

OR mail al	I to: Town of Ge	eneva WI Tourism	n Commission,	N3496 Como Road, La	ake Geneva, WI 53147		
Business/O	rganization Nam	e:					
Contact Per	rson:						
Reimburser	nent Payable To:						
Remittance	Address:						
Contact Pho	one #		Email Address	S:			
Event Date: Eve			Event Name & L	Event Name & Location:			
Invoice Amount	Invoice Date	Date Invoice Paid	Invoice #	Vendor Name	Purchase Description	Sample Marketing Materials or Ad Proofs Included with this form	
For Town of Geneva Wisconsin Tourism Commission Use Only: Fill out more than one copy if needed.							
Date Reimbursement Request Received:				Date Commission Revie			
Date Commission Approved: Sample Marketing Materials or Ad Proofs for all Invoices Included:				Date Check Issued & C	Youn of Geneva WISCONSIN		
Sample Marketing Materials or Ad Proofs for all Invoices Included: YES NO Post Event Report Completed: YES NO Date: Mailed Hand Delivered Publicity Event (Circle One)						Tourism Commission	
If Hand Deliv	vered/Publicity Ev	ent- Check Given T	·o: _				