**County of Charleston – Accommodations Tax**

**Interim/Final Report**

**Fiscal Year 2017**

**Interim Report: for 2017 Recipients- DUE February 15, 2017, by 5:00 pm**

**Final Report: for 2017 Recipients- DUE July 12, 2017, by 5:00 pm**

**SECTION I:** **ORGANIZATION INFORMATION**

|  |  |
| --- | --- |
| Name of Organization: |  |
| Contact Name and Title: |  |
| Contact Phone Number: |  |
| Email: |  |

**SECTION II:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| **OPERATING** | **FY17**  **Award** | **Interim Report** | **Final**  **Report** |
| **A. Advertising or promotion related to tourism development**  Television  Rack Cards  Radio  Billboards  Newspapers  Magazines  Websites  Visitor’s Guide  Mailings (Out of County)  Other (specify) |  |  |  |
| **B. Maintenance or operation of tourist-related building or facility (specify)** |  |  |  |
| **CAPITAL** |  |  |  |
| **C. Construction of tourist-related building or facility (specify Construction Period)**  **From:       To:** |  |  |  |
| **D. Beach Re-nourishment Construction Period**  **(specify Construction Period)**  **From:       To:** |  |  |  |
| **TOTAL REQUEST** |  |  |  |

**Signature of Chief Executive Officer/Executive Director**

|  |  |  |  |
| --- | --- | --- | --- |
| **Printed name and title** |  | **Date** |  |

**Signature of Chief Financial Officer/Board Chairperson \_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **Printed name and title** |  | **Date** |  |

Send to: gmarion@charlestoncounty.org County of Charleston Budget Office

## Attention: Gail Marion

OR

## 4045 Bridge View Drive

**Suite A221**

## North Charleston, SC 29405-7464