

**AGENDA INFORMATION FORM
FOR THE
TONOPAH TOWN/TONOPAH LIBRARY BOARD**

Action Requested:

Description of requested action:

Fiscal Impact:

PETITIONER: (Name, Address, Phone Number, E-mail)

Signature: _____

Date: _____

Request taken by: _____

Date: _____

IF SUBMITTING A HANDWRITTEN FORM PLEASE WRITE LEGIBLY.

SUBMIT COMPLETED FORM AND ANY APPLICABLE BACKUP TO:

jmills@tonopahnevada.com

OR DROP OFF AT THE TOWN OFFICE

IF YOU HAVE ANY QUESTIONS CONTACT THE TOWN OFFICE AT:

775-482-6336

FOR OFFICE STAFF USE ONLY:

DATE OF MEETING:

AGENDA THIS ITEM IS TO BE PLACED ON:

Please note: Due to posting requirements, all agenda items must be turned in by 12:00 noon five working days (Wednesday) prior to the day of the scheduled meeting or by 12:00 noon six working days (Tuesday of the prior week) if a holiday falls prior to the meeting.

NOTE: (The days in parentheses are for regular scheduled Town Board meetings which fall on the second and fourth Wednesday of each month)

In order to facilitate the review and consideration of an agenda item presented to the Tonopah Town Board/Tonopah Library District Board of Trustees, please include all documents or any relevant material or information with your request.

APPLICATION FOR REQUEST OF STATE 5/8THS ROOM TAX GRANT FOR TONOPAH

Organization Name: _____ Phone No.: _____

Mailing Address: _____

Chief Executive Officer: _____ Phone No.: _____

Purpose of Organization: _____

Project Director: _____ Phone No.: _____

Project Title: _____

Is this a new event? _____

If not a new event, please state the number of years in progress. _____

Project Start Date: _____ Project Ending Date: _____

Location of Project and Targeted Market: _____

Amount of Funds Requested: \$ _____

Cost of Total Project: \$ _____

Summarize the Objectives of this Request: _____

Please define the goals of this project: _____

Please project the expected number of visitors this project will bring to the area: _____

Please provide advertising plans and amount of expenditures:

Signs: _____ \$ _____

Brochures: _____ \$ _____

Media Advertising Schedule

Newspapers: _____ \$ _____

Newspapers: _____ \$ _____

Magazine: _____ \$ _____

Magazine: _____ \$ _____

Radio: _____ \$ _____

Radio: _____ \$ _____

Social Media: _____ \$ _____

Television: _____ \$ _____

Misc: _____ \$ _____

Misc: _____ \$ _____

Total Advertising Expenses: _____ \$ _____

Additional Comments: _____

Project Director

Date

PROJECT COMPLETION REPORT

Report for completion of State 5/8ths room tax grant funds for Tonopah must be submitted within 60 days of completion of the project or before the end of the fiscal year for which the grant funds were awarded, whichever comes earlier.

Please submit this report with copies of receipts totaling the amount expended on this grant and any reimbursements, if applicable.

Please provide proofs for all expenditures, i.e. pictures, copies of poster/flyers, etc.

Sort all backup and/or include a list of attachments with detailed explanations.

Organization Name: _____

Mailing Address: _____

Project Title: _____

Amount of Funds Granted: \$ _____

Amount of Funds Expended: \$ _____

Estimated Project Visitors: _____

Estimated visitors who spent one or more nights in Tonopah as a result of this project: _____

Comments on Project Results (For example: Were goals reached? Where did visitors come from?):

Project Director

Date