



## 2016-17 Post Event/Program Reporting Form

Please fill out and return the completed form to the Mendocino County Tourism Commission with 45 days concluding your event or program. There are (3) three ways to submit the completed form:

- email: [info@visitmendocino.com](mailto:info@visitmendocino.com)
- fax: 707-703-4275
- mail/in-person: 345 North Franklin Street, Fort Bragg, CA 95437

### EVENT/PROGRAM DETAILS

Event/Program Name Anderson Valley Holiday Passport Wine Weekends

Date(s) Dec 3 & 4, 2017 to Dec 10 & 11, 2017

Location(s) Twenty-four winery tasting rooms from Yorkville Highlands to Philo and Boonville to Newarra, along Hwy 128.

### EVENT/PROGRAM FUNDING

How much funding did you receive from Visit Mendocino County (MCTC)? \$ 1,000

How were the funds used? The funds were used for printing, design, advertising, promotion, branding ribbon for each location.

How do you feel the grant funds helped your event or program? Without the grant, this event might never have been attempted. As it was, expenses greatly exceeded grant request, at even our own projections, but having launched the event with VMC's help will allow us to continue and grow and evolve the event in future years.



**EVENT/PROGRAM ACTUALS**

Please fill in any and all applicable information below. If not applicable, fill in "N/A". If this is a new event, please fill in the future projections of this portion.

Total Revenue	<u>0</u>	Total Expenditures	<u>\$ 3,013.13</u>
# Attendees	<u>360</u>	% Attendees Outside the County	<u>50%</u>
# Vendors	<u>24</u>	# Volunteers	<u>2</u>
# Room Nights	<u>12</u>	*Hotels, motels, vacation rentals, RV parks & campgrounds.	

**FINAL EVENT/PROGRAM BUDGET**

Please provide or attach up to a one-page outline of your final event/program budget.

**Revenue**

THIS EVENT WAS A COMPLIMENTARY  
PROOF OF CONCEPT, AND THERE  
WAS NO REVENUE. WE WILL  
SELL TICKETS FOR A 2017  
EVENT W/ HIGHER EXPENSES.  
\*EXCEPTION: VMC'S GRANT\*

**OTHER FUNDING**

Other sponsorship dollars \$ \_\_\_\_\_  
 Matching funds \$ \_\_\_\_\_  
 In-kind donations \$ \_\_\_\_\_

**Total Revenue** \$ \* 1,000 \*

**Expenses**

\_\_\_\_\_ \$ \_\_\_\_\_  
see attached. \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**Total Expenses** \$ 3,013.13



**EVENT/PROGRAM QUESTIONNAIRE**

Will you repeat this event or program in the future?  YES  NO

If YES, what are the future dates? December 9 & 10, 16 & 17, 2017

What event(s) or program(s) did you apply your volunteer hours towards? Mendocino County Wine Competition, Rose Today events, MCTC planning committee.

If available, will you be applying for funds next year?  YES  NO

If YES, how much will you be requesting? \$1,028

How could MCTC improve this program? I do not anticipate costs decreasing, but increasing a minimum of \$1,028 for event logo etched glassware. Your help could add a decorative take home memento element to the event, and help us grow and

(please initial) YES, I attest that the information provided in this Post Event/Program Report is true, engender complete and accurate. Should I furnish any false information in this report, I hereby understand that such act return may result in the denial of future funding.

Signature: [Handwritten Signature] Date: 4/11/17 visits to the county.

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