

**GRANVILLE COUNTY
TOURISM DEVELOPMENT AUTHORITY
MINI-GRANT PROJECT EVALUATION**

Submit to: Granville County Tourism Development Authority
P O Box 820 124 Hillsboro Street Oxford, NC 27565
919.693.6126/FAX

Organization: _____
Organization Director/President: _____
Contact Address: _____

Phone Number: _____ email: _____

Name of Project: _____
Date(s) of Project: _____
Location of Project/Event: _____
Purpose of Project: _____

Expenses: \$ _____ Revenue: \$ _____
Total Net Profit: \$ _____

Attendance: _____
How attendance was calculated: _____

Describe how this project increased the use of lodging facilities in Granville County or attracted tourists or business travelers to the county and how that determination was reached.

Signature: _____
(Authorized Representative) (Date)

*Please submit 30 days after the project/event in order to qualify for future funding.