

Klamath County Tourism Grant Final Report

Please provide the following information and submit with your final Drawdown request. 10% of the grant is withheld until we received this final report.

Name of Organization Herald and News

Date of Event/Project 8/1/14 through 10/31/14

Address 2701 Foothills Blvd.

City, State, Zip Klamath Falls, OR 97601

Contact Person Shawn Roetman

Phone Number 541-885-4444

Title of Project Hotel Wrap

1. Where did you spend advertising dollars and did they provide the desired results?
Advertising dollars were spent in retargeting, the results were over 475,000 impressions served with 436 clicks (users clicked on ad and saw a digital version of the hotel wrap. This resulted in a .09% click through rate which is more than double the industry standard of .04%. The advertising worked to promote user engagement.
2. Provide a detailed list of all marketing materials and an electronic version of the material on a CD. (Including audio or video recordings.)

Attached Flash Drive

3. How many people from out-of-county attended?
Unknown, no sure way to measure.
4. How did you determine how many people from out-of-county attended? Why do you feel this is an accurate measurement of the out-of-county attendees?
N/A
5. Do you plan on sponsoring this event again?
There are currently no plans on sponsoring this event again.
6. Do you have any comments or suggestions for the Tourism Review Committee regarding the application, award or reimbursement process?

What happens after you are awarded the fund could benefit from a more detailed explanation. Also it would be nice to have those who were awarded funds and had their events have a post event wrap up meeting. This would allow them to discuss what worked and what didn't work, how to improve for next time.

By signing this you are agreeing that you have paid all bills accrued through this process; as well as agreeing that the Logo Usage Agreement is now terminated.

Signature

Date

Submit Report to:
Tourism Grant Coordinator
Klamath County Finance
305 Main Street
Klamath Falls, OR 97601
541-883-4202

Form # KCF 3007
Revised the 27th of March, 2014
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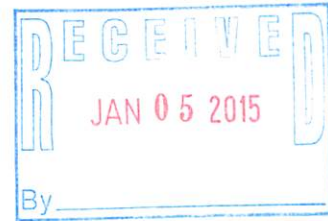
DRAWDOWN REQUEST FORM

KLAMATH COUNTY TOURISM GRANT PROGRAM

Please complete and submit this form to Amanda Blevins, Tourism Grant Coordinator at the address listed below to receive your grant funds.

Herald and News
Name of Organization
2701 Foothills Blvd.
Address
Klamath Falls, OR 97601
City, State, Zip
Shawn Roetman
Contact Person
541-885-4444
Phone Number
Hotel Wrap
Title of Project

Amount of Award: \$ 5,000.00



Balance of Award: \$ 5,000.00
Drawdown Requested: \$ (5,000.00)
Remaining: \$ 0

I/We, the administrator(s) of this project, certify that the attached invoices are accurate and that our project did receive the services/supplies being billed in accordance with the provisions of the Tourism Grant program.

[Signature] Digital Coordinator 12/30/14
Signature Title Date

Attach documentation of the expenses to justify your request: (documentation could include copies of bills, invoices, canceled checks, receipts, etc.) The amount requested must equal or exceed your documentation.

- ✓ All or a portion of the awarded grant funds may be drawn down, as necessary.
- ✓ Checks will be issued according to the County's usual Accounts Payable schedule.
- ✓ Please contact the Klamath County Finance Office at 541-883-4202 with any questions.

Remit to:
Klamath County Finance
305 Main Street
Klamath Falls, OR 97601