



## 2020-2021 Chesterfield County State Accommodations Tax Grant Reimbursement Form

Applicant: \_\_\_\_\_ Reimbursement Request Number: \_\_\_\_\_

				OFFICE USE ONLY				
Invoice Date	Vendor Name	Check Number	Invoice Amount	Proof of Payment	Invoice	Proof of Performance	Fundable Amount	Nonfundable Explanation
<b>TOTAL</b>			\$					

These expenditures are true and correct. All funds indicated above have been expended in accordance with the Chesterfield County State Accommodations Tax grant program. I further understand that the above items may not be funded if the above items do not meet the pre-approved expenditures indicated. This form along with all documentation must be received no later than June 15, 2021.

\_\_\_\_\_  
Project Director Signature

\_\_\_\_\_  
Date

All documentation should be submitted to:

Chesterfield County Economic Development  
c/o Chesterfield County Tourism  
Attn: Darron Kirkley  
PO Box 192



Chesterfield, SC 29709

[chesterfieldcotourism@outlook.com](mailto:chesterfieldcotourism@outlook.com)