Lancaster County Visitors Improvement Fund Grant Guidelines

1. Any visitor attraction in Lancaster County, owned by the public or non-profit organization, whose primary purpose is to operate a visitor attraction, is eligible for fund allocation. Only one application from an entity will be accepted each grant year. New or existing events are not eligible for grant funding.

2. Allocation of Visitor Improvement Fund money will be prioritized as follows:
   a. Expanding and improving any existing visitor attraction.
   b. Planning or developing such expansion improvements, exhibits or additions.
   c. Acquiring or expanding exhibits for existing visitor attractions.
   d. Promotion and advertising costs associated with such exhibits.

3. Requests for general operating expenses, additional personnel and any other financial assistance that does not conform to the intent of the Visitor Improvement Fund will receive no consideration.

4. Requests for grant funds shall not exceed $10,000 per organization each grant year. Goal of grant fund is to provide opportunities as outlined above.

5. Fund applicants must complete the enclosed Visitor Improvement Fund application outlining use and benefits of requested funds. Failure to complete the entire application may result in the rejection of your fund request.

6. Funding requests must be accurately submitted in the appropriate funding categories as defined in the grant application. Requests which do not conform to the proper funding categories may result in the rejection of your fund request.

7. Grant program schedule:

<table>
<thead>
<tr>
<th>Grants due to VPC</th>
<th>Cycle One</th>
<th>Cycle Two</th>
</tr>
</thead>
<tbody>
<tr>
<td>April</td>
<td>October</td>
<td></td>
</tr>
<tr>
<td>Grants reviewed</td>
<td>May</td>
<td>November</td>
</tr>
<tr>
<td>Grants awarded</td>
<td>June</td>
<td>December</td>
</tr>
<tr>
<td>Final date for requesting grant reimbursements</td>
<td>The following June</td>
<td>The following December</td>
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</tbody>
</table>

8. Grant awards will be made twice yearly in June and December unless determined otherwise by the Visitors Promotion Committee and/or the Lancaster County Board of Commissioners. Facilities in Lincoln, at the direction of both entities, must be deemed as adequate in accordance with improvement fund allocations.

9. All grants awards allocated must be encumbered 1 year from date that the grant was awarded. Any monies that your organization has not encumbered by this deadline shall be returned to the Lancaster County Visitor Improvement Fund.

10. All applicants are required to submit a preliminary budget with this application.

11. All grant applications are reviewed for the economic impact the fund allocation will have on Lincoln and Lancaster County. Grant applicants must assume the responsibility for providing inclusive and comprehensive information in this application so that the review committee has all pertinent and relevant details in order to arrive at a decision.

12. Visitor Improvement Funds will be paid to you only upon completion of your project. To request the reimbursement award fund, your organization must either supply a detailed listing of all expenditures and a professional external audit of your organization that covers the period of those expenditures or your organization must supply a detailed listing of those expenditures and copies of all receipts, cancelled checks, contracts and/or other documents that substantiate those expenditures. Current payment of funds will not take place until this audit is supplied.
LANCASTER COUNTY VISITORS IMPROVEMENT FUND
GRANT REQUEST

Name of Organization
__________________________________________________________________

Contact Person
__________________________________________________________________

Address/City/State/Zip
__________________________________________________________________

Telephone ______________ Fax ______________ Email ______________________

Organization Status: Non-Profit ____ Association ____ Civic Group ____ Other ____________________
(If other, please attach explanation)

Applicant Government/organization Federal ID number __________________________________.
If tax exempt organization, designate IRS classification: ______ 501(c)3 ________ 501(c)6.

Provide a detailed description of your exhibit/attraction:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Check all that apply:

_____ Expanding and improving any existing visitor attraction.

_____ Planning or developing such expansion improvements, exhibits or additions.

_____ Acquiring or expanding exhibits for existing visitor attractions.

_____ Promotion and advertising costs associated with such exhibits.

Please describe project as indicated above.
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Project Start Date ________________________ Completion Date _______________________________

Number of attendees estimated: Out of town ______________________ Local _____________________

Specify the activity(ies) for which grant assistance is sought and the grant amount for each activity and
the total funds requested. Provide breakdowns of radio and television advertising, showing individual
costs, call letters and cities of origin. Also give breakdowns of magazine advertising by individual
publications and costs. Similarly, separate the costs for brochures, travel shows by location, billboard
advertising, etc.

Total projected budget (attach detailed budget)
Total Revenue $________________________ Total Expense $________________________

Is this grant request in addition to other project requests? ______________________________
If yes, then list other grant requests _________________________________________

Grant amount requested from Visitors Promotion Committee $____________________
VPC Recommendation
Approved ________ Disapproved ________
Date ________________________________

County Board Decision
Funded ________ Not Funded ________
Date ________________________________