



**CITY OF CLEMSON
ACCOUNTING WORKSHEET
TOURISM RELATED EXPENDITURES
Fiscal Year _____**

NAME OF ORGANIZATION _____

ADDRESS _____ TELEPHONE _____

1. Using this worksheet, please provide a detailed accounting of accommodations tax funds received from the City of Clemson for Fiscal Year _____.
2. Please attach paid invoices from vendors and/or receipts to this worksheet.
3. Failure to attach paid invoices accounting for accommodations tax funds will preclude your organization from receiving future accommodations tax appropriations.

Revenues:

\$ _____ ATAX funds received from the City of Clemson

Expenditures:

\$ _____ Publicity (newspaper, magazine, radio, television, billboard)

_____ Brochures, maps, etc.

_____ Inserts

_____ Postage

_____ Videos, slides

_____ Space rental

_____ Professional Services

_____ Other (provide details)

_____ Other (provide details)

\$ _____ Total ATAX Expenditures

Worksheet Completed By (Please Print) _____ Date _____ Email Address _____