

TOURIST DEVELOPMENT TAX GRANTS REIMBURSEMENT REQUESTS 2024-2025


NAPLES · MARCO ISLAND
EVERGLADESSM
FLORIDA'S PARADISE COAST

SESSION OUTCOMES

- Describe the organizational information for the financial report
- Creation of the summary of the financial report
- Provide the details of the reimbursement request for the following types:
 - Check, ACH, Credit Card, bill.com/payment system, international wire transfer
- Understand the timeframes for the financial reports



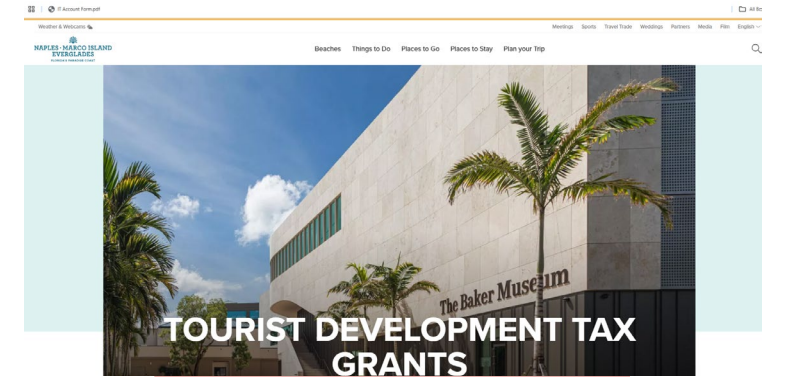


1

**LOGGING
IN**

ARTS AND CULTURE PORTAL

- <https://www.paradisecoast.com/partners/tourist-development-tax-grants>
- Arts and Culture Grant Application System
- Can go to:
 - www.paradisecoast.com
 - Choose Partners
 - Arts and Culture Resources
 - Arts and Culture Tools
 - Annual Arts and Culture Grants – Learn More
 - Arts and Culture Grant Application System



TOURIST DEVELOPMENT TAX GRANTS

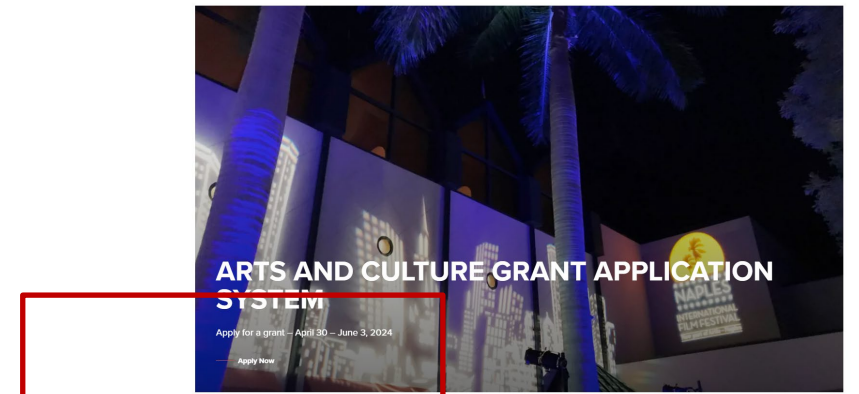
Tourist Development Tax Grant programs are funded through the Tourism Development taxes, also known as the Hotel Surtax. This tax is applied to the rental fees paid by visitors for short-term accommodations such as hotel/motel rooms, condominiums, vacation homes, and rental sources. Thanks to our almost 2 million visitors a year, we can provide funds to help them drive tourism to Collier County (also known as Florida's Paradise Coast).

GRANTS ARE AVAILABLE FOR THE FOLLOWING AREAS:

- Beach Renourishment Projects
- Beach Park Facilities
- Sports
- Arts and Culture
 - Non-County Museums
 - Marketing Grants

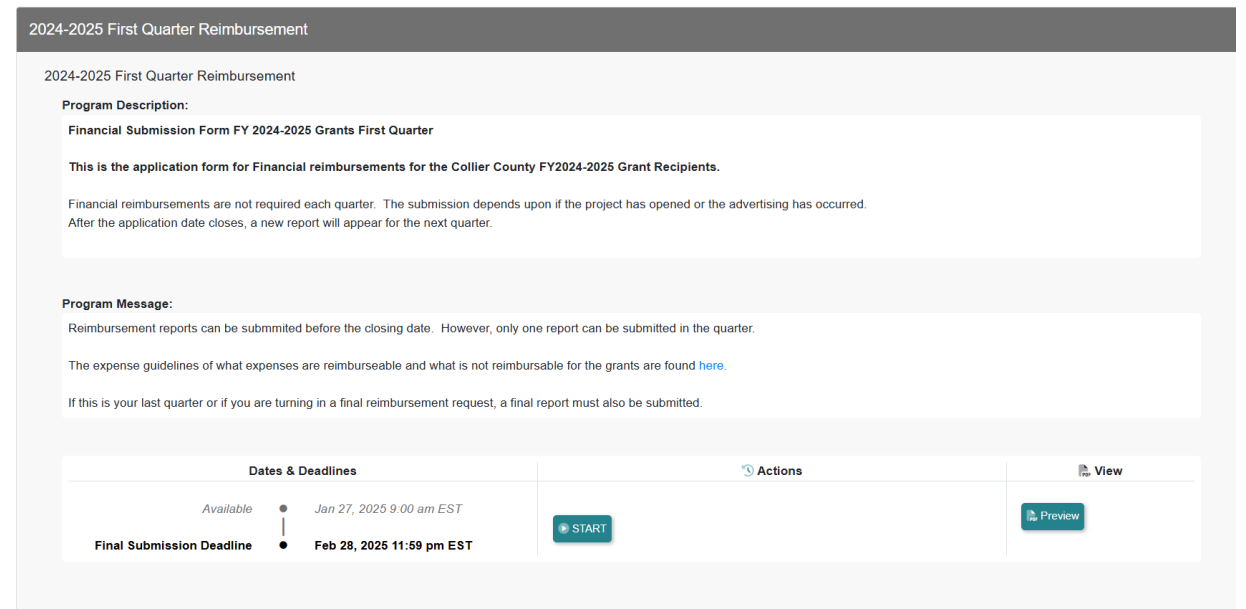
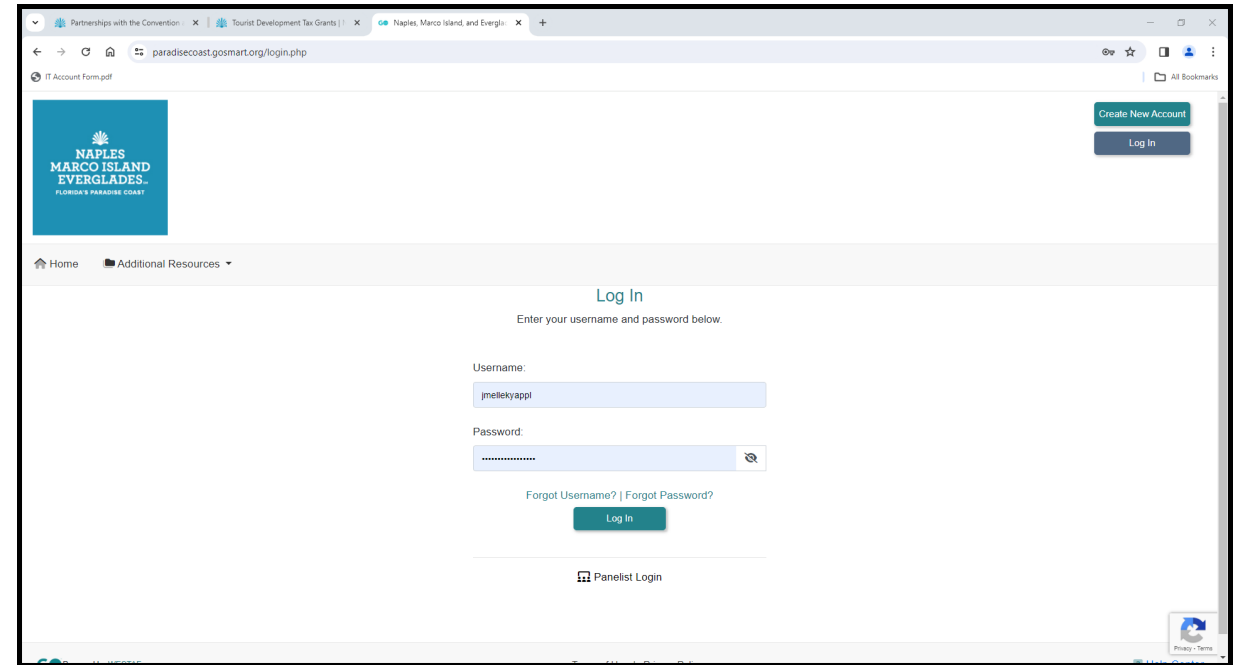
ARTS & CULTURE GRANTS

According to the 2023 Arts and Economic Prosperity Study completed by Americans for the Arts,



SYSTEM LOGIN

- www.paradisecoast.gosmart.org
- Press Log In
- Enter User Name and Password
- Press Enter
- Go to 2024-2025 First Quarter Reimbursement
- Press Start for first time to start the reimbursement
- Can work on application, print out PDF
- Gives information on the deadline





2

REPORT INFORMATION

REPORT INFORMATION: ORGANIZATION, PROJECT, AND CONTRACT

- ORGANIZATION AND PROJECT
 - Organization Name
 - Project Name
 - Grant Category (Select Category B Marketing or C-2 Non-County Museum)
- CONTRACT
 - Project/Event Opening Date
 - Purchase Order Number
 - Total Contract Amount

2023-2024 Quarter 1 Financial Check-
Ins #F-2324-Q10002

Table of Contents
Report Information
Vendor Expense Summary
Detailed Vendor Expense Information
Submission Page

Report Information

This is the Request for Funds for a Collier County Tourist Development Tax Grant for either Category.

Only one report can be submitted in a quarter. It can be submitted at any time during that quarter, but the report will close on the last day of the quarter for that submission.

The report will be an interim type for all requests except for the last request. A final report must also have the completion of the final grant report. If the final grant report is not completed, the processing of the fund request will be held until the final report is completed.

ORGANIZATION AND PROJECT INFORMATION

Organization Name *(required)*

Project/Event Name *(required)*

Character Count: 0 out of 100

Grant Category *(required)*

Select...

CONTRACT INFORMATION

Project/Event Opening Date *(required)*

mm/dd/yyyy

(The project must have opened before submitting any reimbursements.)

Purchase Order Number *(required)*

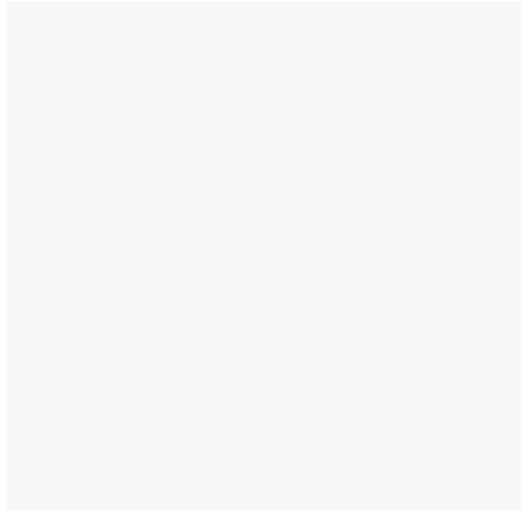
(The Purchase Order Number is found on the Collier County PO sent to the organization.)

Total Contract Amount *(required)*

(Enter the total amount of the contract found on the purchase order or contract.)

REPORT INFORMATION: CONTACT INFORMATION

- Contact Person
- Contact Person Email
- Contact Phone Number



CONTACT INFORMATION

Contact Person *(required)* ⓘ

Contact Person Email *(required)* ⓘ

Character Count: 0 out of 100


Contact Phone Number (xxx) xxx-xxxx *(required)* ⓘ

REPORT INFORMATION: REQUEST INFORMATION


- Start Date – beginning date of fund request
- End Date – end of request – last item
 - Should match the latest invoice in this batch
- Report Type – interim or final
- Request Number – select 1,2, 3 or 4
- Opportunity to enter spreadsheet of expenses or other financial backup (not required)


REQUEST INFORMATION

Request Period Start Date (required) 

mm/dd/yyyy 


(This is the first date of the request of funds and should match the invoice date on the financial details.)

Request Period End Date (required) 

mm/dd/yyyy 

(This is the ending date of the period you of the reimbursements you are requesting.)

REPORT TYPE

Request Report Type - choose one (required) 

Interim

Final

(Reports should be interim unless it is the last one and you are submitting the final report with this request.)

Report Request Number (enter 1,2,3 or 4) (required) 

Select... 

(Enter the request number that this is for your organization/project. The field can be 1, 2, 3 or 4. (1- your first submission, 2 your second submission, etc.))

Upload a .pdf version of any financial spreadsheet for all of the expenses that you will be submitting for this reimbursement request. This is not required but can be used to help with the submission.

No file uploaded.

upload file *(This upload is not required - the next section will be a summary page.)*

Save Work

REPORT INFORMATION: FINANCIAL INFORMATION EXAMPLE

SAMPLE TDC GRANT Purchase Order 4500228603								\$40,000.00	
REQUEST #3								2023-2024 Grant	
Vendor	Invoice	Invoice Date	Invoice Amount	Date Paid	Check #	Check/DR Amount	Request	Feb 16 - Apr 15, 2024	
Magazine	Inv #231224	12/1/23	390.00	12/8/23	#7233	390.00	390.00	Ad in Ft. Myers Magazine	1
Email System	#MC18835154	3/15/24	132.00	3/15/24	DR 6083	132.00	132.00	Monthly Plan Mar	2
Email System	#MC18987674	4/15/24	92.00	4/15/24	DR 6083	92.00	92.00	Monthly Plan Apr	3
Email System	#MC19136945	5/15/24	92.00	5/15/24	DR 6083	92.00	92.00	Monthly Plan May	4
Email System	#MC19288325	6/15/24	92.00	6/17/24	DR 6083	92.00	92.00	Monthly Plan June	5
Email System	#MC19448209	7/15/24	92.00	7/15/24	DR 6083	92.00	92.00	Monthly Plan July	6
Email System	#MC19613197	8/15/24	116.00	8/15/24	DR 6083	116.00	116.00	Monthly Plan Aug	7
Digital Ad Firm	Inv #6038	1/1/24	840.00	1/9/24	#7302	840.00	840.00	Social Media Management	8
Digital Ad Firm	Inv #6142	2/1/24	840.00	2/18/24	#7439	840.00	840.00	Social Media Management	9
Digital Ad Firm	Inv #6654	7/1/24	840.00	7/19/24	#7954	840.00	840.00	Social Media Management	10
Digital Ad Firm	Inv #6751	8/1/24	840.00	8/15/24	#8139	840.00	840.00	Social Media Management	11
Radio	#38-7	4/28/24	155.00	5/16/24	#7818	155.00	155.00	Air Dates 4/5/24 + 4/6/24	12
Total Marketing 100%							4,521.00	4,521.00	
Director/Live Entertainment Performer Fees		Use Check Date for Agreements							
Vendor	Performance			Date Paid	Check #	Check Amount	50.00%		
Royalty org	Royalty and materials for	3/8/24	1,514.00	3/21/24	#7616	1,514.00	757.00	Royalty and materials needed for Production 1	13
Director 1	Production 1	7/19/24	5,000.00	7/19/24	#7948	5,000.00	2,500.00	Production 1 Director	14
Director 2	Production 2	7/30/24	2,802.50	7/30/24	#7972	2,802.50	1,401.00	(2) performances: July 27, 28, 2024	15
Director 3	Production 3	6/21/24	460.00	6/21/24	#7898	460.00	230.00	Production 3 07/12/2024	16
Director 4	Production 4	7/19/24	350.00	7/19/24	#7955	350.00	42.00	Production 4 08/01/2024	17
							0.00		
							0.00		
Total Exhibition/Production			10,126.50			10,126.50	4,930.00		
TOTAL REQUEST						14,647.50	9,451.00		
				Request #	2	12,599.00			
PURCHASE ORDER	4500228603			Request #	1	17,950.00			
BALANCE PO						0.00			

CERTIFICATE OF INSURANCE AND WORKERS COMP - NEW

- Double check your Certificate of Insurance and Workers Comp
- Should be valid throughout the year
- Add these to the application page
- Workers Comp
- **NEW** – If you do not have any, you need to obtain an exemption from the State
- <https://myfloridacfo.com/division/wc/employer/exemptions>
- Upload the certificate form



3

VENDOR EXPENSE SUMMARY

VENDOR EXPENSE SUMMARY

- Summary of all your vendors and expenses this batch
- This page will total the reimbursement request
- Enter the vendor name, invoice number, the total of the invoice and the reimbursement request
- Up to 20 items can be entered

2024-2025 First Quarter Reimbursement
#F-2425-Q10001

Table of Contents	☑
Report Information	
Vendor Expense Summary	
Detailed Vendor Expense Information	
Submission Page	

Vendor Expense Summary

This section is a summary of your vendor expenses you are submitting in this batch for reimbursement. The next section will require detailed information of each expense request.

The total on this page should total the detailed expenses. It is recommended to enter this page as you are entering the detail in another browser column.

For each line item, enter the Expense Description under Expense Description Summary.

The amount of the request is the total of the Reimbursement Request column below. The spreadsheet will total the amount.

The Invoice Total should be the total on the invoice. Typically, this is the same unless there are non-grant related expenses on the invoice. The invoice should reflect that or upload a document explaining that fact as you enter the vendor expense detail.

	Invoice Number	Invoice Total	Reimbursement Request Total
Vendor Name	<input type="text"/>	<input type="text"/>	<input type="text"/>

VENDOR EXPENSE SUMMARY

- List each vendor and invoice
- Enter the Invoice Total and the Reimbursement Request total
- Some instances, only a portion of the invoice is going to be reimbursed
 - Vendor 3 example
- Totals are calculated at the bottom for you
- HINT: Keep this open in one tab as you enter the detail (next section)
- HINT: Try to have the invoice total match the reimbursement request total

Table of Contents

- Report Information
- Vendor Expense Summary**
- Detailed Vendor Expense Information
- Submission Page

Vendor Expense Summary

This section is a summary of your vendor expenses you are submitting in this batch for reimbursement. The next section will require detailed information of each expense request.

The total on this page should total the detailed expenses. It is recommended to enter this page as you are entering the detail in another browser column.

For each line item, enter the Expense Description under Expense Description Summary.

The amount of the request is the total of the Reimbursement Request column below. The spreadsheet will total the amount.

The Invoice Total should be the total on the invoice. Typically, this is the same unless there are non-grant related expenses on the invoice. The invoice should reflect that or upload a document explaining that fact as you enter the vendor expense detail.

	Invoice Number	Invoice Total	Reimbursement Request Total
Vendor Name			
Vendor 1	12,345	1,000	1,000
Vendor 2	5,678	750	750
Vendor 3	987	10,000	3,000
Subtotals:	19,010	11,750	4,750
Expense Totals:	19,010	11,750	4,750

[Save Work](#)

[Previous](#) [View PDF](#) [Save and Next](#)




4

DETAILED VENDOR EXPENSE INFORMATION

DETAILED VENDOR EXPENSE

- All the detail for each expense you want to get reimbursed
- This allows you to enter up to 20 different expenses – should match the items listed on the summary
- You must provide at least one
- Each one is called an “Answer Set”
- Save the page after entering one set to enter the next set
- Review general information and then specific section questions

Table of Contents 

- Report Information
- Vendor Expense Summary
- Detailed Vendor Expense Information**
- Submission Page

Detailed Vendor Expense Information

Enter all the detailed information of the expenses to be reimbursed through the Collier County Tourist Development Tax Grant program.


For Category C-2 Non-County Museum grants:


- at least 50% of your reimbursement must be marketing expenses
- expenses need to be related to the budget entered in your application
- for production expenses, only 50% of your actual production expenses can be submitted.

This page accepts multiple answer sets. You have provided 0 answer sets. You must provide at least 1 answer set. You cannot exceed 20 answer sets for this page.

Save the page to add a new answer set. Click on any answer set to view, edit, or delete that group of answers.

VENDOR INFORMATION


Vendor Name *(required)* 

I certify that this vendor is not an employee of the organization nor related to an employee of the organization and that proper vetting of bids was completed. *(required)* 

Yes

DETAILED VENDOR EXPENSE

- For Category C-2 Grants
 - At least 50% of the reimbursements must be toward marketing expenses
 - Expenses should also be related to the application budget
 - For production expenses, only 50% can be submitted for the entire grant
 - Provide information on your production expenses **OR**
 - Take only 50% of the production expense

Table of Contents 
Report Information
Vendor Expense Summary
Detailed Vendor Expense Information
Submission Page

Detailed Vendor Expense Information

Enter all the detailed information of the expenses to be reimbursed through the Collier County Tourist Development Tax Grant program.


For Category C-2 Non-County Museum grants:


- at least 50% of your reimbursement must be marketing expenses
- expenses need to be related to the budget entered in your application
- for production expenses, only 50% of your actual production expenses can be submitted.

This page accepts multiple answer sets. You have provided 0 answer sets. You must provide at least 1 answer set. You cannot exceed 20 answer sets for this page.

Save the page to add a new answer set. Click on any answer set to view, edit, or delete that group of answers.

VENDOR INFORMATION

Vendor Name *(required)* 

I certify that this vendor is not an employee of the organization nor related to an employee of the organization and that proper vetting of bids was completed. *(required)* 

Yes

DETAILED VENDOR EXPENSE: VENDOR AND EXPENSE INFORMATION

- VENDOR INFORMATION

- Vendor Name
- Certification of type of vendor
 - not an employee, relation to employee, and proper vetting of bids occurred

- EXPENSE INFORMATION

- Amount – must match the reimbursement amount on the summary page
- Expense Description
- Type of Expense – Marketing or Exhibition/Production

VENDOR INFORMATION

Vendor Name *(required)* ⓘ

I certify that this vendor is not an employee of the organization nor related to an employee of the organization and that proper vetting of bids was completed. *(required)* ⓘ

Yes

EXPENSE INFORMATION

Amount of Expense/Amount to Be Reimbursed *This amount should also match the amount listed on the Summary page of this request.*
(required) ⓘ

Expense Description *(required)*

Type of Expense Only Category C-2 Non-County Museum Grants can choose Exhibition/Production

For Category C-2, Exhibition Production expenses should be no more than 50% of the total cost of your expenses. It is recommended to submit your marketing expenses first.

(required)

Marketing

Exhibition/Production


DETAILED VENDOR EXPENSE: INVOICE INFORMATION

- INVOICE INFORMATION


- Invoice Number
- Date of Invoice
 - after start of grant period and in the time frame of the report
- Upload a copy of the invoice

INVOICE INFORMATION

Invoice Number *(required)*

Date of Invoice *(must be after the start of the grant period.) (required)* 

Invoice Copy *Upload a .pdf copy of the invoice. If no invoice, upload the contract. (required)* 

No file uploaded.

DETAILED VENDOR EXPENSE: INVOICE INFORMATION

- Special Details on the invoice
 - Not required
 - Helps with invoice review
 - Explains unique characteristics of invoice
 - Examples:
 - Multiple expenses on the invoice
 - The invoice amount does not equal the reimbursement amount
 - Payments over two checks
 - International payments
 - Production expense calculation

Provide any special details on the invoice if needed.

This could include:

- multiple expenses on the invoice and only part is grant related
- payments over two checks
- international payments - include an upload of the exchange rate on the date the payment was made in Financial Backup
- description of how production expense payments are calculated (if you are only taking 50% of the full invoice.)

Character Count: 0 out of 1000

DETAILED VENDOR EXPENSE: PAYMENT INFORMATION AND OTHER BACKUP

- PAYMENT INFORMATION
 - Payment Type (detail following next pages)
 - Check
 - ACH
 - Bill.com or payment system
 - Credit Card
 - Wire Transfer
- Other Financial Information
 - Backup report, spreadsheet
 - Not required

PAYMENT INFORMATION

Payment Type *(required)*

- Check
- ACH
- Bill.com or payment system
- Credit Card
- Wire Transfer

OTHER FINANCIAL INFORMATION

Other Financial Backup Reports Upload a .pdf of any other financial reports or details needed.

No file uploaded.

upload file

Save Work

DETAILED VENDOR EXPENSE: PAYMENT INFORMATION – CHECK

- Check Number
- Copy of the check stub or payment confirmation page
 - Invoice number should be typed on the stub, not written in
 - Should match invoice listed
 - If multiple expenses on invoice, highlight which expense is the request
- Copy of the cleared/canceled check – front and back
- Copy of the bank statement showing the check being cleared (typically the next month)

CHECK INFORMATION

Reference documents - [Check Example](#)

Check Number *(required)*

Check Stub *Upload a .pdf copy of the Check Stub or payment confirmation page from your finance system. (required)* ⓘ

No file uploaded.

upload file

Copy of Cleared Check *If payment by check, upload a .pdf copy of the cancelled check - both sides. (required)* ⓘ

No file uploaded.

upload file

Upload a copy of the bank statement showing the check being cleared. *(required)*

No file uploaded.

upload file

DETAILED VENDOR EXPENSE: PAYMENT INFORMATION – ACH


- Bank Statement

- Requesting information showing amount paid for the expense
- Page of the expense as long as bank logo and account holder name is on the page being submitted
- Otherwise, the first page of the bank statement must also be included with the page that has the expense

- Payment Information

- Transfer of dollars into the bank account if needed

Reference document - [ACH Example](#)

ACH Bank Statment Copy Upload a .pdf copy of the bank statement showing the payment. 

No file uploaded.

upload file

ACH Payment Information - showing credit card payment or item showing transfer of cash for payment

No file uploaded.


upload file

DETAILED VENDOR EXPENSE: PAYMENT INFORMATION – BILL.COM OR OTHER PAYMENT SYSTEM

- Statement
 - Statement that tracks the payment, including the statement that shows the payment was processed, sent, and cleared
 - Typically, a summary report that shows the tracking of the check and that the check was cashed by the vendor
- Other Reports
 - Vendor Report Detail and Fund Transfer Detail
- Deposit Detail
 - Backup showing the deposit into Bill.com to show that there was money in the system for payment
 - Can include copy of checking account statement showing the transfer of dollars
 - Total should match the amount on the payment system report uploaded


BILL.COM OR OTHER PAYMENT SYSTEM

Reference Document - [Bill.com or Payment System Example](#)

Bill.Com Statement Upload a copy of the bill.com or payment system tracking of the payment, including the information showing that the payment was processed..
(required) 


No file uploaded.

upload file

Bill.com Reports Upload any .pdf reports from Bill.com. Typically it is the Vendor Report Detail and the Fund Transfer Detail if there are multiple payments on that date. See the example for more information. (required) 

No file uploaded.

upload file

Deposit Detail Upload a .pdf of the detail showing the transfer from your checking account into the Bill.com or payment system showing that the funds were there to pay the invoice. (required) 

No file uploaded.

upload file

DETAILED VENDOR EXPENSE: PAYMENT INFORMATION – CREDIT CARD

- Expense Statement
 - Statement that shows the expense
- Payment of Credit Card
 - Backup showing the that the credit card was paid by 90 days after the expense
 - Can be the next statement
 - Cancelled checks can also work

CREDIT CARD PAYMENT

Reference Document - [Credit Card Example](#)

Credit Card Expense Statement *Upload the credit card statement with the charge shown and highlighted. (required)*

No file uploaded.

upload file

Payment of Credit Card *Upload a .pdf file of the statement showing the payment of the credit card charge. (required)*



No file uploaded.

upload file

DETAILED VENDOR EXPENSE: PAYMENT INFORMATION – WIRE TRANSFER

- Wire Transfer Report
 - From bank, showing the wire transfer, including any exchange rate information, date, time of transfer, and vendor number
- Payment Information
 - Documentation of the deduction of the wire transfer
 - Can be a separate receipt
 - Can be your bank statement

Wire Transfer Information

Reference Document - [Wire Transfer / International Wire Example](#)

Wire Transfer Report from Bank *Upload the wire transfer report/confirmation page from your financial institution. (required)*



No file uploaded.

upload file

Wire Transfer Payment Information *Upload a .pdf of the documentation showing the payment of the wire transfer from your financial institution, which is typically your bank statement. (required)*



No file uploaded.

upload file

DETAILED VENDOR EXPENSE: ADVERTISEMENT INFORMATION

- After Other Financial Information
- Logo must be on the ad to get reimbursed
- Digital ads/Social Media Ad – logo on link landing page
- Even if the request is all production expenses, you must provide advertisement information
- Logo on Webpage
- Advertisements
 - Upload the ads that relate to this invoice
 - Emails or webpage- upload a screen shot
- Proof of Performance
 - Upload advertisement and proof of performance information for this ad
- HINT: Only provide the advertisement and information requested

ADVERTISEMENT INFORMATION

Advertisements *Upload a .pdf copy of the advertisement(s) related to this individual invoice.*

A sample of the advertising should be submitted with any C-2 Non-County Museum request for production expenses.



No file uploaded.

upload file

Advertisement Proof of Performance *Upload a .pdf file of the proof of performance or reach of the advertisement.*



No file uploaded.

upload file

Upload a .pdf of your website with the Naples Marco Island Everglades CVB logo on the site.

(required)

No file uploaded.

upload file



5

SUBMISSION AND OTHER INFORMATION

SUBMISSION PAGE

- You must review your work on the submission page and then press submit.
- If a required field is missing, the Submission Page will let you enter the information.
- Once you submit, you cannot make any changes.
- You will receive an email confirming receipt.

SUBMISSION DATES

- **Financial Report 1**

- Open now
- Due by Feb. 28, 2025 11:59 pm

- **Financial Report 2**

- Open Mar. 1, 2025 9am
- Due by Apr. 20, 2025 5 pm

- **Financial Report 3**

- Open Apr. 21, 2025 9 am
- Due by Jul. 14, 2025 5 pm

- **Financial Report 4 FINAL**

- Open Jul. 15, 2025 9am
- Due by Sep. 8, 2025 5 pm

HINTS

- Make sure all documents block out personal information such as account numbers and details not pertinent to the expense.
- Table of Contents allows movement by selecting the main report areas – top left of screen.
- Press the “I” button for information and hints.
- All uploads should be in a .pdf format.
- As you enter the summary and detail, open in two separate tabs and enter this information at the same time to make sure the data matches.
- Click on reference documents for examples.
- Always save your work at the bottom of each page.
- You can submit once a cycle and you do not have to wait until the deadline to submit.
- Deadlines are set by the computer, and if deadline is missed, unsubmitted work will be lost.
- For all payments, you need to show that there was income to make the payment, the payment was processed, and the payment has been cashed by the vendor.
- Requests should be for larger dollar amounts for ease of review.
- Try to have your vendors create one invoice for your reimbursed expenses – it helps in the review process. Mixed invoices tend to get stuck in the review process.
- International payments – document all steps of the wire process, exchange rates, and fees during your financial payments.
- Check that the invoice dates and expenses that occur between October 1, 2024 and September 2025.
- Only provide the information requested and in a .pdf file. Files are all are downloaded with reference information to the vendor and payment.
- Advertising information – no need for a full report for the reimbursement request and it will lead to a more detailed review.

PROCESS AFTER SUBMISSION

- Submission reviewed for anything missing.
- Sent to Clerk's office for review and processing.
- ACH is the fastest way to receive reimbursement. Contact Tourism to start the ACH paperwork.
- Checks sent to the address on your PO.
- Any questions in the various steps will be sent via email.
- Responses can be sent via email.
- We try to anticipate any questions prior to sending the information to the clerk's office.
- Copy Tourism on any emails received from the Office of Management and Budget or the Clerk's office.



A BIG THANK YOU

John Melleky, Arts and Culture Manager

John.Melleky@CollierCountyFL.gov (239) 252-6293