



2016-17 Post Event/Program Reporting Form

Please fill out and return the completed form to the Mendocino County Tourism Commission with 45 days concluding your event or program. There are (3) three ways to submit the completed form:

- email: info@visitmendocino.com
- fax: 707-703-4275
- mail/in-person: 345 North Franklin Street, Fort Bragg, CA 95437

EVENT/PROGRAM DETAILS

Event/Program Name Mushroom, Wine & Beer Camp, produced by the Mendocino County Museum

Date(s) 11/5/16 to 11/5/16

Location(s) Wente Scout Reservation, Willits

EVENT/PROGRAM FUNDING

How much funding did you receive from Visit Mendocino County (MCTC)? \$ 2,500

How were the funds used? Initially, we had intended to use the grant funds solely to cover the cost of providing transportation via MTA buses for guests. However, MTA did not have as many drivers as we needed available, which limited the number of people we were able to transport, as well as the number of pick-up and drop-off locations we were able to offer (for instance, there were no drivers and therefore no buses available from the coast). This lowered those costs. As this was a new event location and the first time without the Skunk Train, the need and extent of publicity and advertising were significantly higher than in previous years, so grant funds were put toward increased costs in those areas.

How do you feel the grant funds helped your event or program? We would not have been able to provide event transportation without the grant assistance because of a tight event budget and unknown response of attendees. Providing buses was critical to planning and producing a safe and fun event, and the research and experience gained in developing the transportation plan were valuable and will be relied upon for future events. The increased amount we were able to put toward advertising meant that we attracted at least a quarter of our paid attendees from outside of the county. Last, but not least, the funds supported our efforts to reformat the event, which had been dependent on the availability of the Skunk Train, and to try an alternate site and different programming.



EVENT/PROGRAM ACTUALS

Please fill in any and all applicable information below. If not applicable, fill in “N/A”. If this is a new event, please fill in the future projections of this portion.

Total Revenue	<u>\$10,353</u>	Total Expenditures	<u>\$13,909</u>
# Attendees	<u>130</u>	% Attendees Outside the County	<u>25% * (Please note this % is for paid attendees)</u>
# Vendors	<u>35</u>	# Volunteers	<u>10</u>
# Room Nights	<u>1-2</u>	<i>*Hotels, motels, vacation rentals, RV parks & campgrounds.</i>	

FINAL EVENT/PROGRAM BUDGET

Please provide or attach up to a one-page outline of your final event/program budget.

Revenue

Ticket Sales	<u>\$ 6,703</u>
MCTC Grant	<u>\$ 2,500</u>
	<u>\$</u>
	<u>\$</u>
	<u>\$</u>

OTHER FUNDING

Other sponsorship dollars	<u>\$ 1,150</u>
Matching funds	<u>\$</u>
In-kind donations	<u>\$</u>
Total Revenue	<u>\$ 10,353</u>

Expenses

Site & Furnishings	<u>\$ 3,151</u>
Setting - Signs & Serveware	<u>\$ 2,479</u>
Publicity	<u>\$ 3,532</u>
Logistics & Permits	<u>\$ 2,150 inc. MTA</u>
Food	<u>\$ 2,372</u>
Programming	<u>\$ 225</u>
Total Expenses	<u>\$ 13,909</u>



EVENT/PROGRAM QUESTIONNAIRE

Will you repeat this event or program in the future? YES NO

If YES, what are the future dates? We will continue to do a MWB event, but in a different format, at the Museum.

What event(s) or program(s) did you apply your volunteer hours towards? To be determined. Please let me know when I would be needed.

If available, will you be applying for funds next year? YES NO

If YES, how much will you be requesting? It will depend on how the event is structured and the need.

How could MCTC improve this program? This is a very valuable program and we hope that MCTC continues to offer it to local organizations to help increase infrastructure support for important community events!

Providing marketing advice and resources, particularly for reaching outside of the county, would be very helpful.

ag please initial) YES, I attest that the information provided in this Post Event/Program Report is true, complete and accurate. Should I furnish any false information in this report, I hereby understand that such act may result in the denial of future funding.

Signature: Alison Glassey Date: January 19, 2017

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