



**2025 – 2026 DURANT TOURISM ECONOMIC DEVELOPMENT TAX
TOURISM PROMOTION FUND – GRANT WRAP-UP**

Name of Organization: _____

Contact Person: _____ Phone: _____

Address: _____ Email: _____

Amount of Award: _____ Date of Event: _____

SUMMARY OF EVENT

Number in Attendance: _____ Average Stay (# of nights): _____

Of Durant Hotel/Motel rooms used: _____ # of other accommodations used: _____

If Durant Hotel/Motels sold out, list other accommodations that attracted overnight visitors:

Comments:

Describe the general impact this event had on the Durant community:

Describe the Success of this event:

TOURISM GRANT WRAP-UP | PROFIT AND LOSS SUMMARY OF EVENT

Attach Paid Invoices

INCOME	
Rental of Booths	\$
Entry Fees/Gate Receipts	\$
Donations/Sponsorships	\$
T-Shirts and Souvenirs	\$
Food, Drinks, etc.	\$
DTEDA Grant	\$
Other (Explain): _____	\$
Other (Explain): _____	\$
Other (Explain): _____	\$
TOTAL INCOME	\$

EXPENSES	
Advertising	\$
T-Shirts and Souvenirs	\$
Food, Drinks, etc.	\$
Labor Costs	\$
Entertainment	\$
Supplies	\$
Postage	\$
Rentals	\$
Insurance	\$
Other (Explain): _____	\$
Other (Explain): _____	\$
Other (Explain): _____	\$
TOTAL EXPENDITURES	\$
Estimate Vale of In-Kind	\$
Other (Explain): _____	\$

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Failure to comply with the requirement, cancellation or change of event from that which was presented, or the use of any logo other than the one provided will result in consideration by the Durant Tourism Economic Development Authority to either disqualify the event from future funding, and request remittance of the funds granted.

Printed Name: _____

Today's Date: _____

DTEDA/Discover Durant
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Durant, OK 74701
discoverdurant@gmail.com
580-924-0848 | www.discoverdurant.com

Date Received: _____ By: _____