



Tourism Matching Funds Application
Part 1

2019 PROGRAM YEAR
(JANUARY 1 - DECEMBER 31, 2019)

2019 Matching Funds Application - Part 1

* 1. Organization/Business Name

* 2. County Name

* 3. Tourism Region

* 4. REDC Region

Capital Region

Central NY

Finger Lakes

Long Island

Mid-Hudson

Mohawk Valley

NYC

North Country

Southern Tier

Western NY

5. Salutation (Mr/Ms/Mrs)

6. First Name

7. Last Name

8. Title

9. Address

10. City

11. State

12. Zip Code

13. Web Site Address

14. NYS Vendor ID [SFS] Number

*this is **not** your EIN number

15. What is the maximum amount of Tourism Matching Funds/State Fund amount your county is requesting for 2019 Matching Funds year?

(\$245,400 is the maximum allowed: 5% of the \$4,908,000)? * if you need assistance with this figure please contact the Matching Funds Director.

16. Of the amount in Question#15: How much of the State Funds will go to your county?

17. Of the amount in Question #15: How much of the State Funds will go to your region?

18. Does the amount in questions #16 + #17 equal the total amount in question #15?

Yes

No

19. How much of your Match (county/local share) will stay with your county?

20. How much of your Match (county/local share) will be transferred to your region?

21. Does the amount in Question #19 + #20 equal the total amount in question #15?

Yes

No

22. County Commitments:

List source(s) of funding for local/county match. Please include both county and private contributions AND their amounts all on the one line.

Source 1:

Source 2:

Source 3:

Source 4:

23. Regional Commitments:

List the program name and the portion of the regional total (dollar amount) listed above for each regional or inter-regional program you will be supporting.

Source 1:

Source 2:

Source 3:

Source 4:

* 24. CERTIFICATION QUESTIONS

Please enter your name for each question as your digital signature confirming each of the following questions.

I certify that I understand that this award is contingent upon the availability of New York State funds.

* 25. I confirm that I have read and agree to the term and conditions as set forth in the 2019 Tourism Matching Funds guidelines.

26. I understand that the required county resolution to designate the TPA for this 2019 Matching Funds year AND a letter of commitment of funds for the APPLICATION AMOUNT will be due at the time of the 2019 Matching Funds Application - Part II.

* 27. I certify that all statements made herein are true to under penalty of making a false statement.