

Tourism Initiative Sponsorship 2026 – Visit Middlesex FINAL REPORT AND CLAIM

Name of Organization/Business:

Project Name:

Date of Invoice/Receipt	Name of Supplier	Product Purchased	Total Amount	HST	Pre-Tax Amount
				Total Project Expenses (Pre-Tax)	
				Total Amount Claimed (50)%	
				Total Amount Approved (per Sponsorship Agreement)	
				Difference (if any)	

Detail the metrics of your event/initiative (please include any relevant stats from social media, number of attendees, ticket sales, etc.)

Attendance (ticket sales, counts, etc.):	
Social Media (views, impressions, etc.):	
Other details:	
Total marketing budget:	

Detail how you acknowledged Visit Middlesex's sponsorship (include any links to social media posts, posters with our logo, where you hosted our promotional literature, etc.)

SUBMITTED BY:

SIGNATURE: _____

NAME: _____

DATE: _____

After submission of this report and eligible receipts, Middlesex County will contact you for an invoice of the Total Amount Approved once approved.

For Middlesex County use only:

Date of Receipt: _____

Approval: _____

Decline: _____

Date of Decision: _____