Exhibit A
Hotel Tax Revenue Program Report

Please list each scheduled activity, program or event directly funded from the Hotel Tax Revenue.	Please list each scheduled activity, program or event which has its administrative costs funded in whole or in part by the Hotel Tax Revenue.	Please list how the scheduled activity, program or event is directly enhancing and promoting tourism and the convention and hotel industry.	Please itemize funds associated with the particular activity, program or event directly funded from the Hotel Tax Revenue.
1.			
2.			
3.			
4.			
5.			

Exhibit A
Hotel Tax Revenue Program Report

Please list each scheduled activity, program or event directly funded from the Hotel Tax Revenue.	Please list each scheduled activity, program or event which has its administrative costs funded in whole or in part by the Hotel Tax Revenue.	Please list how the scheduled activity, program or event is directly enhancing and promoting tourism and the convention and hotel industry.	Please itemize each amount associated with the particular activity, program or event directly funded from the Hotel Tax Revenue.
6.			
7.			
8.			
9.			
10.			

Exhibit B
Financial Activity Report

Agency Name:_____

Quarter:_____

Income Statement

Revenue Source	Agency Actual (Non Hotel Tax Revenue)	Agency Actual (Hotel Tax Revenue)	Quarterly Total
Income			
Fees			
Net Sales			
Contributions			
Individual			
Board			
Foundations/trusts			
Special events			
Organizations			
Civic			
Corporate			
Government Revenue			
City of College Station			
City of Bryan			
Brazos County			
Federal			
State			
School district			
Other Local Sources			
Investment Income (div.,int.,cap gains)			
Other:			
In-kind contributions			
Total Income			

Exhibit B
Financial Activity Report

Agency Name:_____

Quarter:_____

Expense Report

Expense Account	Agency Actual (Non Hotel Tax Revenue)	Agency Actual (Hotel Tax Revenue)	Total
Salaries & Benefits			
Supplies			
Maintenance			
Purchased Services			
Capital Outlay			
Other:			
In-kind expenses			
Total operating Expenses			

Surplus (Deficit)

Fiscal Year	Agency Actual (non Hotel Tax revenue)	Agency Actual (Hotel Tax revenue)	Total
Income/ expenses =			

Explain income statement deficits on an attached sheet.

Exhibit B
Financial Activity Report

Agency Name:_____

Quarter:_____

	(current quarter as of)	(prior quarter as of)
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents		
Investments		
Receivables		
Prepaid expenses		
TOTAL CURRENT ASSETS		
Property and equipment		
Accumulated depreciation		
TOTAL PROPERTY AND EQUIPMENT		
OTHER ASSETS		
TOTAL ASSETS		

Exhibit B
Financial Activity Report

Agency Name:_____

Quarter:_____

LIABILITIES AND FUND BALANCE

	(current quarter as of)	(prior quarter as of)
CURRENT LIABILITIES		
Accounts payable		
Current portion of long-term debt		
Deferred revenue		
TOTAL CURRENT LIABILITIES		
LONG-TERM DEBT, less current portion		
TOTAL LIABILITIES		
FUND BALANCE		
Unrestricted		
Temporarily restricted		
Permanently restricted		
TOTAL FUND BALANCE		
TOTAL LIABILITIES AND FUND BALANCE		

("TOTAL ASSETS" MUST EQUAL "TOTAL LIABILITIES AND FUND BALANCE")

Note, please provide your most current balance sheet and indicate ending month. Also provide your balance sheet as of the end of month..

Exhibit C
Narrative Summary of Activity Report

Please provide a narrative summary of the activities funded with the Hotel Tax Revenue. Use additional sheets if more space is needed.