Radio Advertising

			x 100% Allowed Reimbursement	
	Name of out of county media provider (Radio advertising)	Cost of radio advertising		Cost of out of county media provider to be included on lodgic tax reimbursement request
To be included with this reimbursement request: 1. The invoice from the Radio Station listing the air times			_	
1	The invoice from the Padio Station listing t	2. The radio script that was read on the on the air by the radio station		

	DATE SPECIFIC EVENT ADVERTISED DAY OF THE EVENT AND UP TO 7 DAYS PRIOR					
			x 100% Allowed			
i			Reimbursement			
	Name of in county media provider (Radio	Cost of radio advertising		Cost of media provider to be included on lodging tax		
	advertising)			reimbursement request		
	To be included with this reimb	ursement request:				
1	. The invoice from the Radio Station listing th	•				

		x 30% Allowed	
ii		Reimbursement	-
Name of in county media provider	Cost for distribution to areas		Cost of media provider to be included on lodging tax
	outside of Kittitas County only		reimbursement request
To be included with this reimbursement request:		YOU MUST CALCULATE THE 30% ALLOWED REIMBURSEMENT	

- 2. The radio script that was read on the on the air by the radio station

If a separate party (for example, the Chamber of Commerce) is ordering the Radio advertising for your event. Included with their invoice to you should be any invoices they paid to the marketing company for any Radio advertising services provided.

THE SEPARATE PARTY MUST BE PAID BEFORE YOU CAN SUBMIT YOUR REIMBURSEMENT REQUEST

ALL PAYMENTS TO LODGING TAX GRANTEES ARE PAID ON A REIMBURSEMENT BASIS ONLY. ALL INVOICES SUBMITTED TO THE COUNTY FOR REIMBURSEMENT ARE TO HAVE ALREADY BEEN PAID TO THE VENDOR

DO NOT SUMBIT REIMBURSEMENT REQUESTS FOR INVOICES THAT HAVE NOT ALREADY BEEN PAID TO THE VENDOR