



# 2026 Co Op Advertising Program

## Assist Small Events with Marketing Expenses

Maximum Award: \$500 • No Match Required • Limit 3 application a year

Special consideration given to events taking place outside City of Findlay limits

Applications are due 30 days prior to the start of the event

### Application Timeline

- **Submit Application** - Applications are due 30 days prior to the start of the activity. Limit of 3 Community Connect awards per year per organization
- **Notice of Approval** - To be received within 15 days of receipt of application
- **Have a Successful Event** - We want to ensure you have a great event, let us know how we can assist!
- **Submit Request for Reimbursement** - Reimbursement form, related receipts, and proof of logo usage are due within 60 days after the completion of your program
- **Reimbursement Processed** - Within 30 days of the receipt of the completed reimbursement request and supporting materials you will receive your reimbursement check

### Application and Reimbursement Checklist

- **Fill out application and budget worksheet** - Complete all sections of the application. Attach extra sheets, if necessary. We understand this is your projected budget, and may change during the course of event planning. Just give us your best estimate.
- **Call the CVB or set up a meeting if you have any questions** – The CVB wants to help you have a successful event. Schedule a meeting to create a marketing plan, recommendations for vendors, and any questions you may have. The Community Connect Program is designed for organizations to eventually graduate to the Co Op Advertising Program.
- **Submit application** – Submit 30 days before the start of your event. You will be notified within 15 days of the 60 day deadline if your program has been approved.
- **Keep copies of all receipts, quotes, and invoices for eligible items** – They must be attached to the Reimbursement Request for payment.
- **Submit reimbursement request** – Submit no more than 60 days after the conclusion of the event or program, or by December 15, whichever comes first. Must include your actual financial outcome, copies of receipts, and proof of logo usage on marketing and promotional materials.
- **Watch the mail** – After review, your check will be processed within 30 days.

**Complete every page of the application and worksheet!**

**Make sure to read the fine print on page 5 to see if your organization is eligible, priority areas, eligible expenses, documentation and more.**

**Contact Visit Findlay with any questions you may have:**

**[info@visitfindlay.com](mailto:info@visitfindlay.com) & 419-422-3315**

## 2026 Community Connect Program Application

<b>Name of Event/Program:</b>																			
<b>Event Date(s):</b>		Event Location:																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px;">Organizing Group:</td> <td colspan="3" style="padding: 5px;"></td> </tr> <tr> <td style="width: 20%; padding: 5px;">Contact Name:</td> <td style="width: 25%; padding: 5px;"></td> <td style="width: 25%; padding: 5px;">Role in Organization:</td> <td style="width: 30%; padding: 5px;"></td> </tr> <tr> <td style="width: 20%; padding: 5px;">Contact Phone:</td> <td colspan="3" style="padding: 5px;"></td> </tr> <tr> <td style="width: 20%; padding: 5px;">Mailing Address for Grant Correspondence:</td> <td style="width: 25%; padding: 5px;"></td> <td style="width: 25%; padding: 5px;">Permission to share your organization in a press release?</td> <td style="width: 30%; padding: 5px;"></td> </tr> </table>				Organizing Group:				Contact Name:		Role in Organization:		Contact Phone:				Mailing Address for Grant Correspondence:		Permission to share your organization in a press release?	
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<b>(R4) Amount Requested:</b>		<b>(E2) Budgeted Event Advertising Expenses:</b>																	
<b>(E1) Budgeted Total Event Expenses:</b>		<b>(E5) Projected Total Event Revenue:</b>																	
<p>Briefly describe your event:</p>																			
<p>What is your goal for the event? What would you like for the impact to be?</p>																			
<p>Who will be enjoying or attending this event? How do you plan to reach them?  <i>Please detail specific marketing ideas or include your marketing plan.</i></p>																			
What other events are taking place the same day/weekend as your event?		How will this affect your attendance? Are there opportunities for collaboration?																	
How many years has this event taken place?		Estimate previous year's attendance, if applicable.																	

**Reminder: You must use the CVB logo in your marketing materials.**

**Failure to do so will potentially affect your grant award and possibility for future awards.**

## 2026 Community Connect Program Application Worksheet

All numbers should be estimates. Think what your goal is and use those numbers to calculate your projected revenue

### Projected Revenue

#### **(R1) Projected event income from sales:**

Any income expected from tickets, merchandise, advertising or exhibitor spots, etc.

\$ \_\_\_\_\_

#### **Sponsorships & Donations**

Have you begun soliciting sponsorships and donations? Yes / No

#### **(R2) Goal Sponsorships and Donations?**

Any income expected from organizations or individuals in the form of sponsorships or donations.

Please do not including this CVB request.

\$ \_\_\_\_\_

#### **(R4) Amount Requested from CVB**

No more than half of budgeted advertising expenses up to the eligible amount

\$ \_\_\_\_\_

**Sales (R1) \_\_\_\_\_ + Donations (R2) \_\_\_\_\_ = \$ \_\_\_\_\_ (R3) + Grant Request (R4) \_\_\_\_\_ = (R5)**

### Projected Expenses

#### **(E1) Total General Expenses:**

May include facility costs, contracts/professional fees, equipment, etc.

These expenses are not covered by Community Connect funds

\$ \_\_\_\_\_

#### **Advertising and Marketing Expenses:**

Signage, advertising and media buys, creative development, postage, website, printed materials, registration bags, etc. Only cash expenses are eligible, in-kind monetary amounts do not count toward eligible Advertising & Marketing Expenses. A list of eligible items can be found on Page 4. Additional Pages may be added if necessary.

**Item Description** (include if local/non-local) i.e. On-Site Remote, Local - Blanchard River Broadcasting

**Cost**

1	_____	\$ _____
2	_____	\$ _____
3	_____	\$ _____
4	_____	\$ _____
5	_____	\$ _____

#### **(E2) Total Estimated Advertising and Marketing Expenses:**

\$ \_\_\_\_\_

**General Expenses (E1) \_\_\_\_\_ + Advertising Expenses (E2) \_\_\_\_\_ = \$ \_\_\_\_\_ (E3)**

### Projected Net Revenue

Will your event be profitable? This projection will give you an idea if your budget and goal have you on a profitable course.

**Projected Revenue (R5) \_\_\_\_\_ + Projected Expenses (E3) \$ \_\_\_\_\_ = \$ \_\_\_\_\_ Net Revenue**

## 2026 Community Connect Program Application

### Application Guidelines and Fine Print

**Who May Apply:** Any organization seeking to produce or promote an event or program that has the potential to create a positive image in the Findlay-Hancock County Area. In order to be considered for funding, all activities must be open to the general public or have non-exclusive membership. Preference will be given to non-profit organizations and special consideration will be given to events taking place outside of the City of Findlay. No more than three Community Connect applications may be submitted by any one organization, per calendar year.

**Amount Requested and Use:** This program is for Marketing and Advertising funds only (See list of eligible expenses below), and requests up to \$500. Award amounts will be based on need and marketing plans outlined in the application. Only cash expenses are eligible, in-kind monetary amounts do not count toward eligible Advertising & Marketing Expenses. Payment is processed after Reimbursement Request, and copies of receipts and promotional materials are submitted.

**Marketing and advertising expenditures covered by this grant may include:**

- |               |                       |   |
|---------------|-----------------------|---|
| • Radio spots | • Postage and Mailers | • Event brochures, fliers and posters   |
| • Television  | • Print ads           | • Other expenses as approved by the CVB |
| • Billboards  | • Digital Marketing   |   |

**Application:** The application, including the budget worksheet, must be completed at least 30 days before the start of the event or program. Applicants are also required to meet or hold a teleconference with CVB staff to clarify any questions about the grant program, and to increase understanding of other support offered by the CVB. Incomplete or late applications will not be considered for approval.

**Documentation and payment:** A Reimbursement Request form is available at [VisitFindlay.com](http://VisitFindlay.com). Within 60 days of the end of the event, please fill out this form with information about its outcome and success. Proof of payment, paid invoices, copies of checks and original artwork or photographs of VisitFindlay logo in advertising materials must accompany the Reimbursement Request form in order to receive reimbursement. Email documentation separately if using online form. Payment will be issued once this document is received and processed.

**CVB Logo:** The current Hancock County Convention & Visitors Bureau logo and/or website must clearly be presented in all marketing materials, press releases, and presentations. Failure to acknowledge the CVB and/or failure to use correct CVB logo in event promotions will disqualify the organization from receiving reimbursement funds. Failure to comply could also limit the organization's ability to apply for future funding from the CVB. Correct Visit Findlay logos can be downloaded at [VisitFindlay.com/VisitFindlayLogo](http://VisitFindlay.com/VisitFindlayLogo) or requested by emailing [info@visitfindlay.com](mailto:info@visitfindlay.com).

**Special Circumstances:** If the program or event is cancelled for any reason, all unused funds must be returned to the CVB. In the event your organization has special requests outside of the realm of the program guidelines, the CVB Grant Committee will review and present a recommendation to the CVB Advisory Board for approval. Applicants will be notified if special procedures are needed.

*The Hancock County Convention & Visitors Bureau Advisory Board and Staff have the right to refuse any or all applications, if they are deemed outside the boundaries of the mission of the Convention & Visitors Bureau. \*All decisions are final\*  
\*Disbursement of funds is dependent on the receipts collected from the bed tax from year to year\**

Signature

Title

Date

*An electronic signature above signifies that this document is complete, and all information within is accurate.*

**Return Completed Application to Hancock County Convention & Visitors Bureau**

**MAIL: 123 East Main Cross, Findlay, Ohio 45840 or EMAIL: [info@visitfindlay.com](mailto:info@visitfindlay.com) or ONLINE: [VisitFindlay.com](http://VisitFindlay.com)**

**Note: Completed application must be submitted no later than 60 days prior to the start of the event.**

**A complete application consists of: Completed original application form, completed Worksheet, and supporting documents**

**Questions? Contact the CVB at 419.422.3315, or email [info@VisitFindlay.com](mailto:info@VisitFindlay.com).**