



FLAGLER COUNTY CULTURAL COUNCIL

Tourism Destination Development Grant Program
Budget vs. Actual Expense Reporting Form

Project Name:	
Organization:	
Contact Name:	
Mailing Address:	
Phone:	
Email:	

Expense Type	Estimated Budget	*Final Actual Cost	Notes
TOTALS			

*This form must be completed and submitted with your application. Upon project completion and submission of a reimbursement request, this form will be included as supporting documentation, with the **Final Actual Cost** column finalized.