



Grants Workshop

Friday, August 28, 2026

Grants Workshop Objectives



Note: Workshops are informational and designed to support your journey —they do not guarantee funding.



Welcome
OUR
**NEW TEAM
MEMBER!**

Simone McDaniel
Grants and Compliance
COORDINATOR

We're excited to welcome **Simone McDaniel**
as our new Grants and Compliance Coordinator.
We're glad to have you on the team!

- Six years of experience managing federal and state grant programs.
- Experienced in grant administration, compliance, monitoring, and contract management.
- Skilled in fiscal oversight, budget management, expenditure review, and grant reporting.
- Experienced in subrecipient monitoring, risk assessment, corrective actions, and regulatory compliance.
- Knowledgeable in interpreting and applying federal and state laws, regulations, grant requirements, and agency policies.

ORGANIZATION & ACCURACY

Best Practices for Application & PER Processes



1. SUBMIT COMPLETE DOCUMENTATION

Include all required application or post-event materials, supporting records, financial documentation, and event-related backup.



2. ENSURE INFORMATION IS ACCURATE

Verify dates, amounts, attendance figures, room nights, event details, and other reported information before submission.



DATES



AMOUNTS



ATTENDANCE



ROOM
NIGHTS



EVENT
DETAILS



3. ORGANIZE DOCUMENTS CLEARLY

Arrange supporting documentation in a logical order and clearly identify what each document supports.



- ✓ Logical Order
- ✓ Clearly Labeled
- ✓ Easy to Reference



4. MAKE DOCUMENTATION EASY TO FOLLOW

Reports, invoices, receipts, payment records, tracking documents, and other supporting materials should be legible, clearly labeled, and easy to understand without requiring additional explanation.



REPORTS



INVOICES



RECEIPTS



PAYMENT
RECORDS



TRACKING
DOCUMENTS



ORGANIZATION



Clearly connect supporting documents to reported results

Documentation should allow reviewers to easily verify reported expenses, attendance, room nights, and other grant deliverables.



EXPENSES



ATTENDANCE



ROOM NIGHTS



GRANT
DELIVERABLES



Review your submission before sending

Confirm that all required documentation is included and that information is accurate and consistent across all submitted materials.



Remember the final review

Documentation should provide sufficient clarity and support for Florida Sports Foundation staff and the Auditor, who serves as the final reviewer.



APPLICATION DEADLINES



Deadlines are firm.
Submit early to ensure your application is complete.



APPLICATION CHECKLIST

BEFORE YOU BEGIN

Use this as your eligibility/readiness checkpoint.



ECONOMIC IMPACT:

\$500,000 Minor / **\$5 million** Major



COMPLIANCE WITH
statutory requirements



EVENT START DATE

must be at least **60 DAYS**
after the grant cycle closes



BE PREPARED TO PROVIDE:



MARKETING PLAN



DETAILED BUDGET



COMPLETE APPLICATION



All applications must be submitted through Fluxx.



APPLICANT & EVENT INFORMATION

Provide complete and accurate information so we can understand your organization and the event you are planning.



ORGANIZATION INFORMATION



Organization & Applicant

Enter the organization applying for the grant and the applicant responsible for the submission.



Contact Information

Provide current contact information so FSF can reach the appropriate person regarding the application.



Alternate Contact

Identify a secondary contact who is familiar with the event and application.



Sanctioning Body

Identify the applicable sanctioning or governing organization.



EVENT INFORMATION



Event Title & Dates

Use the official event name and confirm the event dates are accurate.



Website

Provide the event website, if applicable.



Event Type & Sport(s)

Clearly identify the type of event and sport(s) involved.



Event Description

Explain what the event is, who participates, and what will occur.



Venue(s), City & County

Identify where the event will take place, including all applicable venues and locations.



KEY REMINDER: Provide enough detail for the reviewer to fully understand the event without prior knowledge of the event or sport.



EVENT HISTORY

You can provide the past two (2) years of history for this event—regardless of whether it was funded by FSF.



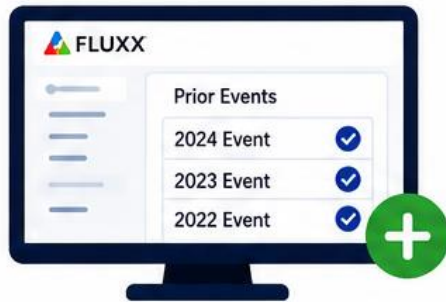
In the new version of the application, you will be able to associate prior events to your request.



Upon Save, the locations you have chosen will populate automatically.

1

ADD FSF FUNDED EVENT



- ✓ Choose **Add FSF Funded Event**
- ✓ Select the green plus (+) sign to associate the event

2

ADD PRIOR EVENT (NOT FUNDED BY FSF)



- ✓ Choose **Add Prior Event (Not Funded)**
- ✓ Enter the requested details

INFORMATION THAT WILL BE CAPTURED



Prior Events



Location



Date



Attendance



Economic Impact

INFORMATION THAT WILL BE CAPTURED



Prior Events



Location



Date



Attendance



Economic Impact



WHY IT MATTERS

Providing complete history helps us understand your event's track record and the impact on Florida communities.



You may add up to the past two (2) years of event history.

NON-ECONOMIC FACTORS



These factors help show the value beyond the numbers.



ORGANIZATIONAL READINESS

Describe how the event operators are prepared for this event.



COMMUNITY IMPACT

Explain how this event will have a positive effect on the local community.



SUSTAINABILITY

Identify 2 eco-friendly initiatives associated with the event or the venue.



YOUTH ENGAGEMENT

Describe how youth attending (not participants) will be engaged at the event.



MILITARY INCLUSION

How are military or veterans included/recognized at your event?



HEALTH & FITNESS

Describe how attendees (not participants) are encouraged to participate in a Health or Fitness initiative at or during the event.

MARKETING & PROMOTION

APPLICATION STAGE



Tell us
how you **PLAN** to promote

Include the following specific areas:



Social media accounts



Event **hashtags**



Media outlets



Advertising/**promotional** activities



Promotion of **Florida**



Promotion of **Florida Sports Foundation**



Promotion of **professional sports**
and **specialty license plates**



These are the specific marketing areas
requested by the worksheet.



POST-EVENT STAGE



Show us
what **ACTUALLY** happened



- ✓ Provide actual examples and proof of promotion.
- ✓ Include links, screenshots, clippings, schedules, and photos.
- ✓ Show the reach, visibility, and engagement generated by your event.
- ✓ Demonstrate how you promoted Florida, FSF, and specialty license plates.

FUNDING & PROJECT EXPENSES



GRANT REQUEST



Major – \$5M Impact

☐

Minor – \$500K Impact

☐

Amount Requested

\$



Bid Documentation,
if applicable



PROJECT EXPENSES

EXPENSE CATEGORY	AMOUNT
 Bid Fees	\$
 Rights Fees	\$
 Venue Fees	\$
 Production	\$
 Marketing	\$
 Sanction Fees	\$
 Non-Monetary Awards	\$
TOTAL PROJECT EXPENSES	\$



ADDITIONAL SUPPORT

MATCHING FUND SOURCE

AMOUNT

\$



Please ensure all amounts are accurate and supported by documentation.

ECONOMIC IMPACT INPUTS



LODGING



STAY DAYS



ROOM NIGHTS



ROOM RATE



LODGING TAX RATE



PARTICIPANTS



OOS
ADULT



OOS
YOUTH



IN-STATE
ADULT



IN-STATE
YOUTH



ATTENDEES



OOS
ADULT



OOS
YOUTH



IN-STATE
ADULT



IN-STATE
YOUTH



MEDIA



OOS MEDIA



IN-STATE MEDIA



Stay Days:
Total number of days
participants stay.



Room Nights:
Stay days x number
of room nights.



Room Rate:
Average nightly
rate.



Lodging Tax Rate:
Local tax rate
on lodging.



These inputs are used to
calculate the total economic
impact of your event.

Post Event Worksheet

Pam's Test Event

2026-02460

Fluxx Support Testing

\$20,000.00

03/31/2026 – 03/31/2026

Minor

PER Submitted:

Calculated Reductions Minor \$48,808.65 Major \$ 48,872.43

Economic Impact

CRITERIA	PROJECTED	ACTUAL	OUTCOME
Visitors	50	8,233	
Average Stay	1	0	
Room Nights	10	7,374	
Room Rate	\$ 1,000	\$ 169	
Matching Funds	\$ 0	\$ 40,000	
Eco Impact (tax)	\$ 19,135.14	\$ 3,106,337.13	
ROI (tax)	\$ 0.39	\$ 155.32	

Documentation

COI	☐	Start	End
Agreement Signed	☐		
Room Nights	☐		
Attendees	☐		
Expenses (PoP)	☐		
Visibility	☐		
Matching Funds	☐		

Documentation

- **Accurately demonstrate what occurred** during the event through clear and verifiable supporting documentation.
- **Support all expenditures being claimed** with appropriate invoices, receipts, proof of payment, contracts, and other required documentation.
- **Follow the grant policy requirements** when preparing and submitting post-event documentation.
- **Ensure documentation is complete and organized** so information can be easily reviewed and verified.

Remember: If it isn't documented, it cannot be verified or supported for reimbursement.

Accurate, complete, and organized documentation is essential to a successful post-event report and reimbursement process.

Certificate of Insurance

Reminder:

The COI is
due upon
signing of
the contract.



Certificate of Insurance

An insurance document listing the Foundation as an additional insured for all purposes, with minimum liability coverage of \$1,000,000 per occurrence

- Listed as additional insured for all purposes

Florida Sports Foundation
1203 Governor’s Square
Boulevard Suite 300
Tallahassee, Florida 32301

- Minimum liability coverage of \$1,000,000 per occurrence

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/15/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

CONTACT
NAME:
PHONE (A/C, No, Ext):
FAX (A/C, No):
E-MAIL ADDRESS:
INSURER(S) AFFORDING COVERAGE
INSURER A :
INSURER B :
INSURER C :
INSURER D :
INSURER E :
INSURER F :

NAIC #
18058

INSURED

INSURER A :
INSURER B :
INSURER C :
INSURER D :
INSURER E :
INSURER F :

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY	Y		EV177059	11/24/2025	12/31/2025	EACH OCCURRENCE \$ 1,000,000
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
							MED EXP (Any one person) \$ EXCLUDED
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 3,000,000
	GENERAL AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:						PRODUCTS - COMPROP AGG \$ 3,000,000
	AUTOMOBILE LIABILITY						UNOWNED SINGLE LIMIT (Ea accident) \$
	ANY AUTO OWNED AUTOS ONLY						BODILY INJURY (Per person) \$
	HIRE AUTOS ONLY						BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE ☐ OTHER ☐
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NJ) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N	N / A				E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Pensacola Sports Association is Additional Insured in regard to General Liability. All Certificate Holder privileges apply only if required by written agreement between the Certificate Holder and the Insured and are subject to policy terms and conditions.

Florida Sports Foundation is Additional Insured in regard to General Liability. All Certificate Holder Privileges apply only if required by written agreement between the Certificate Holder and the Insured and are subject to policy terms and conditions.

CERTIFICATE HOLDER

CANCELLATION

Florida Sports Foundation
1203 Governors Square Blvd, Suite 300
Tallahassee, FL 32301

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

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Post Event Reporting



1. PROOF OF PROMOTION

Provide documentation showing how the event was promoted.



2. PROOF OF PAYMENT

Provide invoices, receipts, canceled checks, EFT/ACH confirmations, or other proof of payment.



3. VERIFICATION OF ROOM NIGHTS

Provide a report from the contracted hotel(s) showing actual room nights utilized.



4. PROOF OF MATCHING FUNDS

Provide documentation verifying the source and amount of matching funds.



5. VERIFY PARTICIPANTS/FANS/MEDIA NUMBERS

Provide documentation supporting the total number of participants, fans, and media in attendance.



6. CERTIFICATE OF INSURANCE

Provide a current Certificate of Insurance naming all required parties.



TIMELY & COMPLETE DOCUMENTATION MATTERS!

Accurate, complete, and organized documentation helps ensure compliance and a smooth reimbursement process.



PER Timeframes

- Once your event concludes, you have **ninety (90) days** to complete and submit your **Post-Event Report in Fluxx**.
- **Mark your deadline early** and allow enough time to gather, organize, and review all required supporting documentation.
- Need more time? **Extensions may be requested** when additional time is necessary.
- **Extension requests must be submitted in writing** and include a **brief but detailed explanation** of the circumstances requiring additional time.
- **Don't let the clock run out!** Communicate with Florida Sports Foundation staff before your 90-day deadline if additional time is needed.



Proof of Promotion

EXAMPLES OF ACCEPTABLE PROOF



FSF BANNER AT EVENT



PROGRAM COVER WITH FSF LOGO



SOCIAL MEDIA POST EXAMPLE



PHOTO PROMOTING FSF AND LICENSE PLATE PROGRAM

TELEVISION SPOTS (IF APPLICABLE)



If television spots for the event were part of the benefits, then a schedule of airtime should be included.

EXAMPLE AIRTIME SCHEDULE			
DATE	TIME	PROGRAM	STATION
6/10/26	6:15 PM	Sports Central	WPLG 10
6/11/26	5:45 PM	Game Night Live	WPLG 10
6/12/26	6:30 PM	Sports Central	WPLG 10

Website Snapshot

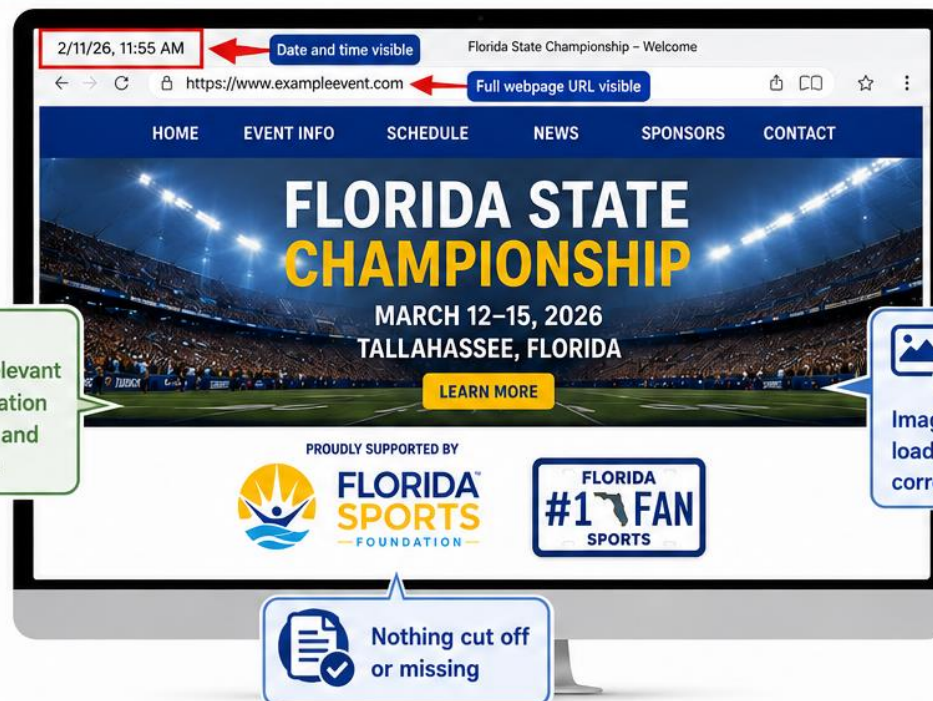


WEBSITE DOCUMENTATION



Websites can change at any time.

A screenshot or PDF captures what was displayed when the grant requirement was met. A website link alone may not be sufficient if content is later changed, moved, or removed.



WHY IT MATTERS: A complete and accurate website snapshot helps verify promotion and ensures compliance with grant requirements.

WHEN SAVING OR PRINTING TO PDF:



Include the **date and time**



Include the **full webpage URL**



Ensure **relevant information** is **visible and legible**



Check for **missing/broken images**



Confirm nothing is **cut off** or **missing**

BEFORE SUBMITTING:



Review the PDF to ensure it **clearly** and **accurately** supports the grant requirement.

Social Media References & Photos



SOCIAL MEDIA DOCUMENTATION

Social media documentation should be **carefully curated, clear, and easy to verify.**



DATE

May 17, 2026
10:30 AM



LOCATION

Lakeland, FL
(Joker Marchant Stadium)



CONTEXT

Announcement of partnership and event promotion.



GRANT CONNECTION

Highlights support for the Florida Sports Foundation, the State of Florida, and Florida specialty license plates through event promotion.



Sunshine Sports Classic

May 17, 2026 at 10:30 AM · Lakeland, FL

Thrilled to partner with the [Florida Sports Foundation](#) to bring world-class competition to Florida! 🏆 ⚽ 🏃

#PlayInFlorida #SupportFloridaSports #FloridaSportsFoundation



128

15 Comments 42 Shares



Like



Comment



Share

EACH SUBMISSION SHOULD INCLUDE:



SCREENSHOT OF THE POST

Screenshot of the social media post.



DIRECT LINK TO THE POST

Direct link to the original post.



DATE POSTED

Date the content was posted.



LOCATION, WHEN APPLICABLE

Location associated with the post, when applicable.



CONTEXT

Context explaining what the post represents or documents.



GRANT CONNECTION

Clear identification of how the post supports or promotes the Florida Sports Foundation, the State of Florida, or Florida specialty license plates, as applicable.



CLEAR, LEGIBLE IMAGES

Photos and screenshots that are clear, legible, and easy to review.



REMEMBER:

The reviewer should be able to look at the documentation and easily understand **WHAT** was posted, **WHEN** and **WHERE** it was posted, and **HOW** it supports the grant requirements.

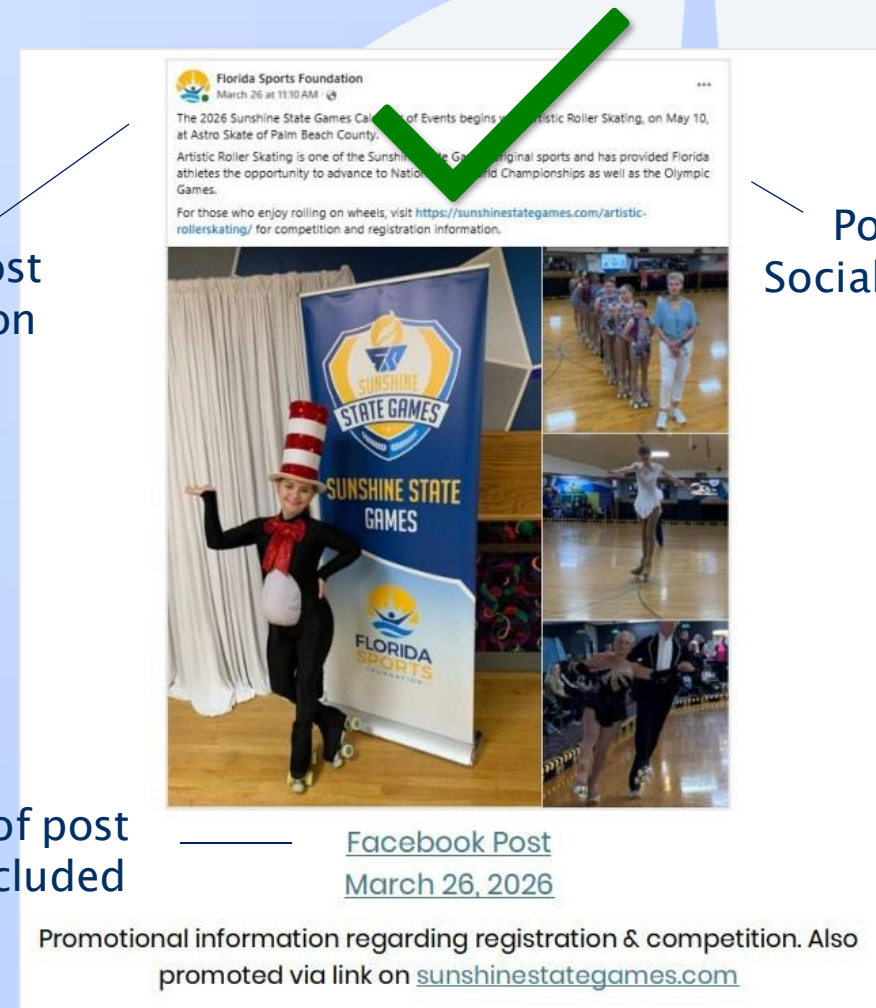
Photos



Logo shown but
date and location
unknown

Content of post
identifies location

Link & date of post
included



Posted to
Social Media

Facebook Post
March 26, 2026

Promotional information regarding registration & competition. Also
promoted via link on sunshinestategames.com

Proof of Payment



EXPENSE & PROOF OF PAYMENT DOCUMENTATION

Provide documentation that shows the expense and proves payment was made.



INVOICE	RECEIPT	CONTRACT
_____ \$	_____ \$	_____
_____ \$	_____ \$	_____
_____ \$	_____ \$	_____
_____ \$	_____ \$	_____
		Michael

1. Invoices, receipts, contracts, etc.

A copy of invoices, receipts, contracts, etc. that were paid for by the grantee (**no exceptions**), that indicate and define the expense.



MICHAEL JACKSON
JACKSON COUNTY COMMISSIONERS
2864 Madison Street
Marianna, FL 32446

DATE 05/15/2025

PAY TO THE ORDER OF Event Services, LLC \$ 1,250.00

One Thousand Two Hundred Fifty and 00/100 DOLLARS

MEMO Event Expenses

123456789 987654321 1001

FRONT

MICHAEL JACKSON
JACKSON COUNTY COMMISSIONERS
ENDORSE HERE

For Deposit Only
Michael Jackson
Jackson County Commissioners

BACK

2. Canceled checks (front & back)

Canceled checks (front & back) dated within the grant period*.



EFT (Electronic Funds Transfer) ✓

Transaction Date: 05/20/2025
From: Michael Jackson
Jackson County Commissioners
To: Event Services, LLC
Amount: \$1,250.00
Confirmation #: EFT789456123

ACH (Automated Clearing House) ✓

ACH Payment Confirmation
Date: 05/20/2025
From: Michael Jackson
Jackson County Commissioners
To: Event Services, LLC
Amount: \$1,250.00
Trace/Confirmation #: ACH123987456

3. Electronic funds transfers (EFT) or automated clearing house (ACH)

Documentation showing the electronic payment was completed.



INTER-GOVERNMENT TRANSFER ✓

Payment Number: IG-2025-0456
Payee: Michael Jackson
Jackson County Commissioners
Event Date: 05/10/2025
Invoice/Reference: Invoice #INV-2025-105

Transfer Date: 05/18/2025
From: Michael Jackson
Jackson County Commissioners
To: Jackson County Tourism Department
Amount: \$1,250.00

4. Inter-government transfers

Dated within the grant period and which details the payment number, payee, the event date and/or invoice.



* Exception: **pre-paid bid fees**



All payment documentation must be dated within the grant period, unless the exception applies.

Proof of Payment

INVOICE vs PAYMENT: KNOW THE DIFFERENCE

ABC Track and Field Club – Two Eggs, Florida

INVOICE



Indicates & defines the expense

Invoices

INVOICE

Invoice #: 1001
Date: 05/01/2024

Bill To:
ABC Track and Field Club
Two Eggs, FL

Description	Amount
Track Meet Entry Fee	\$1,000.00
Total	\$1,000.00

Thank you!
Due Date: 05/15/2024

Receipts

RECEIPT

Date: 05/01/2024

From: Florida Track Association
Tallahassee, FL

Track Meet Entry Fee \$1,000.00

Total \$1,000.00

Thank you!

Contracts

CONTRACT



This agreement is between
ABC Track and Field Club
(Two Eggs, FL)
and
Florida Track Association
(Tallahassee, FL)

Purpose:
Participation in the Florida
Youth Track Championship

Date: 04/15/2024
Through: 05/31/2024

By: Jane Doe



These documents show what is owed and the details of the expense.

PAYMENT



Illustrates payment is complete

Canceled Check

ABC Track and Field Club Two Eggs, FL 32301	Date: 05/03/2024	1001
Pay to the Order of Florida Track Association	\$1,000.00	
One Thousand and 00/100		Dollars
For Florida Youth Track Championship Entry Fee	John Smith	
::123456789:: 9876543210::		

EFT (Electronic Funds Transfer)

ELECTRONIC FUNDS TRANSFER CONFIRMATION

Date: 05/03/2024 Time: 9:41 AM

From: ABC Track and Field Club
Account Ending in 4567

To: Florida Track Association
Account Ending in 9876

Amount: \$1,000.00

Confirmation #: EFT5839201



Completed

ACH (Automated Clearing House)

ACH PAYMENT CONFIRMATION

Date: 05/03/2024 Time: 9:41 AM

From: ABC Track and Field Club
Account Ending in 4567

To: Florida Track Association
Account Ending in 9876

Amount: \$1,000.00

Trace/Confirmation #: ACH90837456



Completed



These documents show that payment has been made and is complete.

Verification of Participants/Fans/Media Turnout



ROOM NIGHT VALIDATION

Room nights must be supported by tracking documentation for **attendees and teams** that clearly identifies the **source or origin** of the data.



Must include tracking backup for attendees and teams.



This supporting documentation must list a **source or origin**.



Must reflect **actual** room nights **utilized** by attendees and teams.

EXAMPLE:



A report from the hotel(s) contracted for the event showing **actual** room nights utilized—not simply rooms blocked or reserved.



GRANDVIEW
HOTEL

ROOM NIGHT REPORT

For the Event

Event Dates: May 1 – May 5, 2024

Source / Origin:
Grandview Hotel
123 Main Street
Two Eggs, FL 32454

Report Date:
May 6, 2024

Contact:
Sales Department

TEAM / GROUP	CHECK-IN	CHECK-OUT	ROOM NIGHTS UTILIZED
ABC Track Club	5/1/24	5/5/24	40
Sunshine Runners	5/1/24	5/4/24	30
Coastal Striders	5/2/24	5/5/24	24
Elite Athletics	5/1/24	5/3/24	16
TOTAL ROOM NIGHTS UTILIZED			110

Prepared by:

Jennifer Lane

Sales Manager



TRACK
Attendees
& Teams



SOURCE
Identified



ACTUALS
Room Nights
Utilized



Accurate documentation ensures **compliance, transparency**, and strengthens the **integrity** of our event reporting.



Thank you for your
commitment to accuracy!



ROOM NIGHT DO'S



Ask hotels for their
Pick-up reports



Indicate the **origin or source**
of your numbers, e.g.,

- Letterhead
- Original reports
- Email thread
- 3rd party service



Include **actual**,
not projected or
estimated, numbers



Submit an **average**
room rate, not the
highest rate



WHY IT MATTERS: Accurate room night documentation
verifies the economic impact of your event and
supports responsible use of grant funds.



PICK-UP REPORT

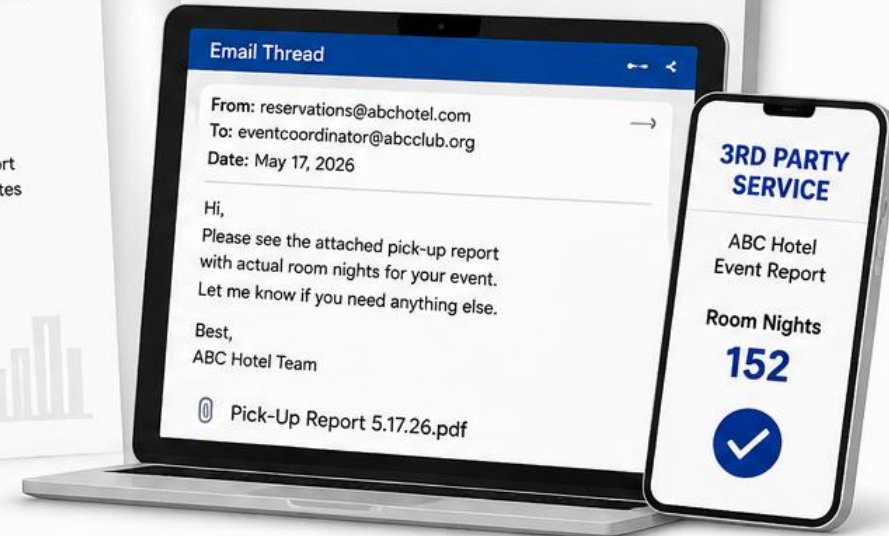
Report Date: May 17, 2026

Source: ABC Hotel

DATE	ROOM NIGHTS	ADR
May 15	48	\$142.50
May 16	51	\$139.75
May 17	53	\$141.25
TOTAL	152	\$141.17

Average Daily Rate (ADR): \$141.17

Actual
NOT
Estimated!





ATTENDANCE



Out-of-state visitor numbers are **one of the most important metrics we track** – they tell Florida's story to our legislators, stakeholders and our community.



Provide verification that supports the number of **out-of-state individuals** who participated in or attended the event.

POTENTIAL VERIFICATION SOURCES



TICKET SALES

Reports or summaries that show the number of out-of-state ticket purchasers.



TRAVEL ASSOCIATION REPORTS

Official reports or data from local or state travel and tourism organizations.



SURVEYS

Attendee surveys that capture residency or zip code information.



REGISTRATIONS (PARTICIPANTS)

Participant registration data, including residency or location details.



KEY REMINDER

Documentation should clearly support the **actual out-of-state attendance** or participant numbers reported.



ACCURATE NUMBERS. STRONGER IMPACT. **A BETTER FLORIDA.**



**FLORIDA
SPORTS**
— FOUNDATION —



BRANDING & BENEFIT REQUIREMENTS



PROMOTE FLORIDA.
SHOW THE BENEFIT.
TELL THE STORY.

REQUIRED SUPPORTING DOCUMENTATION

1.



SOCIAL MEDIA

URLs and screenshots of social media posts*



Florida Soccer Showcase

May 17, 2026 · Orlando, FL · 🌐

Proud to partner with the Florida Sports Foundation to bring world-class competition to Florida! ❤️💙

#PlayInFlorida #FloridaSportsFoundation



2.



LOGO & BANNER PLACEMENT

Digital photos showing logo and banner placement*



3.



EVENT/PROGRAM ADVERTISING

Digital copies of event/program advertising



4.



TV & INTERNET BROADCASTS

URLs or digital recordings of television or internet broadcasts



www.floridasportsevents.com/broadcasts/

Florida Soccer Showcase – Championship Game
May 17, 2026

5.



BROADCAST VERIFICATION

Published link or excerpt of a broadcast recording; the full broadcast is not required



www.local10.com/sports/2026/05/17/florida-soccer-showcase-highlights/

Florida Soccer Showcase Highlights

Watch highlights from the championship game of the Florida Soccer Showcase.



DATES AND LOCATIONS

must be provided for all applicable documentation.



**ACCURATE DOCUMENTATION ENSURES FLORIDA'S STORY IS TOLD
AND THE BENEFIT OF YOUR EVENT IS RECOGNIZED.**



**FLORIDA
SPORTS**
- FOUNDATION -



ECONOMIC IMPACT SUMMARY

TOTAL ACTUAL DIRECT ECONOMIC IMPACT w/o tax: **\$5,072,991.16**

Actual ROI: \$202.92

Direct Economic Impact x Sales Tax 7.0% =

Actual Sales Tax Collected: **\$355,109.38**

\$5,072,991.16

x 7.0%

\$355,109.38

Total Hotel Impact \$2,336,886.63 x Lodging/bed tax rate 6.0% =

Actual Hotel Tax Collected: **\$140,213.20**

\$2,336,886.63

x 6.0%

\$140,213.20

Actual Economic Impact w/o Tax:

\$3,792,182.58

\$5,072,991.16
- \$1,280,808.58
(Taxes)

Actual Sales Tax Collected:

\$265,452.78

\$355,109.38
- \$89,656.60*
(Retained locally)

Actual Hotel Tax Collected:

\$104,812.73

\$140,213.20
- \$35,400.47*
(Retained locally)

Total Actual Economic Impact:

\$4,162,448.09

\$3,792,182.58
+ \$265,452.78
+ \$104,812.73

Actual ROI with Taxes:

\$166.50

\$4,162,448.09
÷ Total Attendance

*Retained locally amounts are illustrative and used for accurate calculation of Actual Economic Impact w/o Tax.



*Accurate data protects your full award — and we want to help you **get every dollar you have earned.***

When entering the calculated numbers into the fields below the calculations, remember:



The calculation runs every time **you click Save.**



If you change any of the Economic Impact numbers after you have initially saved, you will need to **compare the numbers again.**



Inaccurate data can result in **reductions.**



**ACCURATE DATA. FULL IMPACT.
EVERY DOLLAR YOU EARNED.**



Review your numbers carefully.
Save, compare, and submit with confidence.



**FLORIDA
SPORTS
— FOUNDATION —**



ACTUAL vs. PROJECTED



When your event wraps up, share your projected numbers with the real ones — actuals tell the true story of your event's impact.

PROJECTED NUMBERS



Entered in the
Grant Application



Represent
anticipated or estimated
event results



Cannot be used
in place of
actual results



GRANT APPLICATION

VS.

ACTUAL NUMBERS



Entered in the
Post-Event Report



Represent the
final, documented
event results



Must be supported
by appropriate
documentation



POST-EVENT REPORT



KEY REMINDER:



Projected = What you expect.



Actual = What happened —
and what you can document.

Reimbursement

Events that achieve 80% or more of their projected impact are eligible for their full award.

If performance exceeds minimum thresholds but falls below 80%, reimbursement may be prorated.

Natural disasters or extraordinary circumstances will be reviewed case-by-case.

Life happens — if your event faces extraordinary circumstances, please reach out and we will work through it together.





**Protect your Award
Support a Clean Audit Trail**



We are here for every step of the process. Thank you for everything you do to make Florida the sports capital of America.

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THANK
😊 YOU!