**Validation Form:** This form must be completed as part of the “Close Out Report”. If the “Marketing Program or Creative Project” does not lean itself to overnight stay and this form is uanble to be completed, please do not apply for the grant .

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has (have) received Clarion County

 (Organization(s)

Tourism Grant funds to conduct a tourism related program. As a result, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ had an increase in overnight stays with approximately

 (Clarion County Lodging Establishment)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ people staying in \_\_\_\_\_\_\_ rooms.

 (number) (number)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lodging Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant Recipient Signature