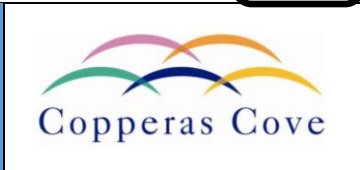


**City of Copperas Cove
Post Event Form
FY 2020-2021**



Organization Information

Submission Date:

Name of Organization:

Street Address: Primary Phone #:
Mailing Address (if different from above): Secondary Phone #:
E-mail:

City: Web Site Address:
State: Organization Type:
Zip Code: Tax ID #:

Contact Name: Entity's Creation Date:

Purpose of your organization:

Approved Funding Details

Amount Received:

Name of funded activity/project:

Date(s) of funded activity/project:

Primary location(s) of funded activity/project:

How were the funds used? Provide a detailed cost justification.

Primary purpose of funded activity/project (describe):

Has the organization used General Funds in the past (if Yes, explain the results)?

How did your organization directly enhance the quality of life in the City of Copperas Cove through the use of General Funds?

Economic Impact

How did your organization use other Copperas Cove businesses while carrying out the purpose/mission of the organization or event (printing, catering, rentals, etc.)?

Additional sheets may be attached for further information.

Please Submit no later than 60 days after the funded event to:

Budget Department
BudgetOffice@copperascovetx.gov
254-547-4221