

DMO MARKETING PLAN FORM (rev Nov, 2019)

For the Fiscal Year: _____, 20__ to _____, 20__

CVB Name:

Person Completing Report:

Title:

Date of first annual Formal Board Meeting: _____, 20__

- **A quorum was present:** Yes: _____ No: _____
- **The Marketing Plan was Approved:** Yes: _____ No: _____

Bureau Mission Statement:

Targeted Customer Groups (e.g. meeting planners; motorcoach tours; leisure travelers; families; arts; golf, etc.):

Targeted Geographic Markets:

Promotional Methods:

Proposed methods of analyzing marketing results:

How the CVB Marketing Plan coordinates with the Michigan Tourism Strategic Plan:

- 1. Collaboration and Marketing:**

- 2. Destination Development:**

- 3. Public Policy and Funding:**

How the CVB Marketing Plan coordinates with Travel Michigan Marketing Programs:

Phase 2

.....
Date of second annual Formal Board Meeting: _____, 20_____

- A quorum was present: Yes: _____ No: _____**
- The Marketing Plan was Reaffirmed: Yes: _____ No: _____**
- If No, explain the proposed changes*:**

***All changes must be approved at a meeting with the Vice-President of Travel Michigan immediately following the amendments.**

- Date of scheduled meeting: _____, 20_____**
 - Revised Plan was approved: Yes: _____ No: _____**
-

CVB sign: _____ Travel MI sign: _____

Date: _____