Basketball Playoff Financial Report (For a single game played at a host school)

The appointed game manager will complete this form and the ticket accountability form. Mail these forms no later than 10 days following the contest along with a check for the amount on Line H to: NCHSAA, Attention: Gary Cavanaugh, P.O. Box 3216, Chapel Hill, NC 27515

Men's	s_ Women's _ (Check one)			
Home	Team	Vs.	Visiting Team		
Site: _			Date:		
Classi	fication:				
A) To	tal Tickets Sold (Pre-Sale Tot	al + Gate Sa	ales Total)		(A)
B)	Total Gate Receipts			\$	(B)
C)	Other Receipts	(Radio and	l Television Fees)	\$	(C)
D)	Total Gross Receipts (B+C)			\$	(D)
E)	Less: Endowment	(\$1 per # of	tickets sold)	\$	(E)
F)	Gross Revenue (D-E)			\$	(F)
G)	NCHSAA Share (0.15 x F)			\$	(G)
H)	**	Check to N	NCHSAA(G + E)	\$	(H)
I)	Adjusted Gross	(Line	D minus Line H)	\$	(I)
J)	Game Expenses				
	Officials (actual expenses)	\$			
	Police (actual expenses)	\$			
	Ticket Handlers (\$30 max.)	\$			
	Scorer, Timer, PA (\$25 max.	\$			
	total)				
	Miscellaneous	\$			
	(please itemize)				
		Total Gam	e Expenses	\$	(J)
K)	Net Gate (I-J)			\$	(K)
L)	Home Team Share (K/2)	\$	(L)		
M)	Visiting Team Share (K/2)	\$	(M))	
Mail to	o: Gary Cavanaugh NCHSAA P.O. Box 3216 Chapel Hill, NC 275	2	1.Ticket Accounta 2.Financial Report 3.Check in the Am		
	ffice use only: received: Ch	neck #	Che	eck Amount:	

Basketball Playoff Single Game

NCHSAA Ticket Accountability Form

In order to better provide accountability of ticket sales in play-off contests, please use this form. After each home play-off game, the host school is responsible for completing this form and returning it along with a check to:

returning it ald NCHSAA, At	_		gh, P.O). Box 3216, Ch	ape	l Hill, NC	275	515.				
			vs. Visiting Team									
Classification: Site: _		Date:										
Pre-Sale Tickets												
Beginning Number	thru thru	Ending Number	+1=	Total Tickets Sold	<u>@</u>	Sale Price Each	=	\$ Value				
	thru thru		+ 1=		@ @		=					
Total	unu		+ 1-		(a)		=					
Gate Sale Tickets												
Beginning Number	<u>thru</u>	Ending Number	<u>+ 1=</u>	Total Tickets Sold	@	Sale Price Each	≡	\$ Value				
	thru		+ 1=		@		=					
	thru		+ 1=		@		=					
T 1	thru		+ 1=		@		=					
Total												
Director's Signature			School Name			Da	nte					

This form is to be submitted with the financial form, and check to the NCHSAA office no later than 10 days following the date of contest. Failure to do so may result in a fine.