Football Financial Report
Second Round

Mail to:	Gary Cavanaugh NCHSAA P.O. Box 3216 Chapel Hill, NC 27515	1.Ticket Accountability Form 2.Financial Report 3.Check for the Amount on Line H

Home Team ______________________ vs. Visiting Team ________________________

Site: ____________________________ Date: _______________________________

Classification: _____________________

A) Total Tickets Sold (Pre-Sale Total + Gate Sales Total) _______________ (A)

B)	Total Gate Receipts		$ _______________	(B)
C)	Other Receipts	(Radio and Television Fees)	$ _______________	(C)
D)	Total Gross Receipts (B+C)		$ _______________	(D)
E)	Less: Endowment	(Same as Line A)	$ _______________	(E)
F)	Gross Revenue	(Line D minus Line E)	$ _______________	(F)
G)	NCHSAA Share (0.15 x Line F)		$_______________	(G)
H)		Check to NCHSAA(G + E)	$ _______________	(H)
I)	Adjusted Gross	(Line D minus Line H)	$ _______________	(I)
J)	**Allowable Expenses**			
	Game Officials	$ _______________		
	Police	$ _______________		
	Ticket Takers/Gate Keepers	$ _______________		
	Home Team Expenses	$ _______________		
	Misc. Expenses *(Itemize & attach)*	$ _______________		
	Total Allowable Expenses		$ _______________	(J)
K)	Net Gate (I-J)		$ _______________	(K)
L)	Home Team Share (K/2)	$ _______________ (L)		
M)	Visiting Team Share (K/2)	$ _______________ (M)		
N)	Travel Reimbursement	$ _______________ (N)		

Travel 0-75 miles one-way

(Meals= $270.00)

Travel 76-149 miles one-way

(Meal=$270.00 + $0.75/mile round trip)

Travel 150+ miles one-way

(Meal=$270.00 + $0.75/mile round trip + Hotel $360)

O) Total Paid to Visiting Team (M+N) $ _______________ (O)

For office use only:
Date received: ___________ **Check #** ____________ **Check Amount:**__________