Financial Report for Endowment Game

Return this form to the Accounting Department, NCHSAA, P.O. Box 3216, Chapel Hill, NC 27515-3216. The principal of the host school or the appointed game manager will be responsible for filling out this report. A check for 25% of the gross gate receipts should accompany this report. Failure to submit this form within **ten (10) working days** will be subject to a \$50.00 fine. In addition, future endowment game requests from the host school **may not be approved** by the NCHSAA.

*** If your game was cancelled for any reason, you must return this financial form to the association indicating the cancellation.

Spor	†:			
Home Team:				
Site:	Date:		Winner:	
A)	Total Gate Receipts			A) \$
B)	Other Receipts (Radio	/TV Fees)		B) \$
C)	Total Gross Receipts (A	x+B)		C) \$
D)	NCHSAA Share (.25 x C	E)		D) \$
E)	Adjusted Gross Receip	ts (C-D)		E) \$
F)	Total Expenses **			F) \$
G)	Net Receipts (E-F)			G) \$
H)	Home Team Share**			H) \$
I)	Visiting Team Share**			I) \$
	e competing schools ar n shares.**	e responsible f	or determining allowable	expenses and the
Mail	to: ACCOUNTANT NCHSAA P.O. Box 3216 Chapel Hill, NO		1. Financial Report 2. Check in the Amount f	rom Line D
For office use only: Date received: Check # Check Amount:				