

**Basketball Fourth Round  
NCHSAA Ticket Accountability Form and Playoff Financial Report  
(For a single game played at a host school)**

A copy of this ticket accountability form/financial report and a check for the NCHSAA share + Endowment \$1 per ticket amount (Line H) must be completed by the host school and mailed to the NCHSAA office no later than 10 days following the date of the contest. This form is to be forwarded to the NCHSAA regardless of revenue. Schools that fail to complete this form and submit payment within 10 days could be subject to a fine.

Send forms and checks to:  
NCHSAA, Attention: Gary Cavanaugh, P.O. Box 3216, Chapel Hill, NC 27515.

**Men's\_\_ Women's \_\_ (Check one)**

Home Team \_\_\_\_\_ vs. Visiting Team \_\_\_\_\_

Site: \_\_\_\_\_ Date: \_\_\_\_\_

Classification: \_\_\_\_\_ Round: \_\_\_\_\_

|    |  |          |     |
|----|--|----------|-----|
| 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 (\$1 per # of tickets sold)            | \$ _____ | (E) |
| F) | Gross Revenue (D-E)                                    | \$ _____ | (F) |
| G) | NCHSAA Share (0.15 x F)                                | \$ _____ | (G) |
| H) | ** <b>Check to NCHSAA(G + E)</b>                       | \$ _____ | (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 Game Expenses                                    | \$ _____ | (J) |
| K) | Net Gate (I-J)   | \$ _____ | (K) |
| L) | Home Team Share (K/2)                                  | \$ _____ | (L) |
| M) | Visiting Team Share (K/2)                              | \$ _____ | (M) |

**For office use only:**  
Date received: \_\_\_\_\_ Check # \_\_\_\_\_ Check Amount: \_\_\_\_\_

## Basketball Fourth Round Playoffs, 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:  
 NCHSAA, Attention: Gary Cavanaugh, P.O. Box 3216, Chapel Hill, NC 27515.

Home Team \_\_\_\_\_ vs. Visiting Team \_\_\_\_\_

Classification: \_\_\_\_\_ Site: \_\_\_\_\_ Date: \_\_\_\_\_

#### Pre-Sale Tickets

| Beginning Number | thru | Ending Number | + 1= | Total Tickets Sold | @ | Sale Price Each | = | \$ Value |
|------------------|------|---------------|------|--------------------|---|-----------------|---|----------|
|                  | thru |               | + 1= |                    | @ | \$9.00          | = |          |
|                  | thru |               | + 1= |                    | @ | \$9.00          | = |          |
|                  | thru |               | + 1= |                    | @ | \$9.00          | = |          |
| Total            |      |               |      |                    | @ | \$9.00          | = |          |

#### Gate Sale Tickets

| Beginning Number | thru | Ending Number | + 1= | Total Tickets Sold | @ | Sale Price Each | = | \$ Value |
|------------------|------|---------------|------|--------------------|---|-----------------|---|----------|
|                  | thru |               | + 1= |                    | @ | \$9.00          | = |          |
|                  | thru |               | + 1= |                    | @ | \$9.00          | = |          |
|                  | thru |               | + 1= |                    | @ | \$9.00          | = |          |
| Total            |      |               |      |                    | @ | \$9.00          | = |          |

Total Ticket Revenue (Pre-Sale Total + Gate Sales Total) \$ \_\_\_\_\_

Total Tickets Sold (Pre-Sale Total + Gate Sales Total) \_\_\_\_\_

\_\_\_\_\_  
 Director's Signature

\_\_\_\_\_  
 School Name

\_\_\_\_\_  
 Date

**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.**