Women's Lacrosse State Championship

NCHSAA Ticket Accountability Form

The event director will fill in this report and return it, along with the play-off financial report and check, to: NCHSAA, Attention: Gary Cavanaugh, P.O. Box 3216, Chapel Hill, NC 27515.

Home Team _____ vs. Visiting Team _____

Classification: _____ Site: _____ Date:_____

Gate Sale Tickets

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

Total Ticket Revenue $ _____

Total Tickets Sold _____

_____ _____ _____

Director's Signature School Name Date