Wrestling State Championships

NCHSAA Ticket Accountability Form and Play-off Financial Report

In order to better provide accountability of ticket sales in play-off contests, the following form has been developed. The meet director 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.

Beginning Number			Site		Classification			Date	
		Δ	dmissi	ion Tickets S	hla'	I			
<u>Number</u>	<u>Thru</u>	Ending	<u>+ 1=</u>	Total Tickets	<u>@</u>	Sale	ĪΞ	\$ Value	
		Number		Sold		Price Each			
	thru		+ 1=		@		=		
	thru		+ 1=		@		=		
	thru		+ 1=		@		=		
		Total Tickets	Sold		_				
A) Total Gate Receipts								(A)\$	
B) Less: Endowment (\$1 per Ticket Sold)							(B)\$		
		_							
C) Gross Revenue				(Line A – Line B)				(C)\$	
D) Expenses				\$			_		
				\$			_		
			Total	Total Expenses			(D)\$		
E) Net Revenue (Line C – Line D)								(E)\$	
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*Check to NO	THSAA	=Net Revenue	(Line F) + \$1 per total	# 01	f tickets so	old	\$	
Check to IV		-1 tot Revenue	(Line L	j i wi per totar	<i>11</i> O1	i ilekeis si	olu	Ψ	
Director's Signature			School Name			Date			
		•		ancial report ar					
		•	_	ate of the contes					
NCHSAA reg to a fine.	gardiess	or revenue. F	anure to	complete this f	orm	ı wilnin ti	ie ten	i day iimit is st	