

NCHSAA, Attention: Gary Cavanaugh, P.O. Box 3216, Chapel Hill, NC 27515.

	Site: _____	Date: _____
Women's	Home: _____	Visitor: _____
	Class: _____	Round: _____
Men's	Home: _____	Visitor: _____
	Class: _____	Round: _____

Beginning Number	thru	Ending Number	+ 1=	Tickets Sold	@	Sale Price Each	=	\$ Value
	thru		+ 1=		@	\$8.00	=	
	thru		+ 1=		@	\$8.00	=	
	thru		+ 1=		@	\$8.00	=	

A) Total Value of Ticket Sales	(A)\$ _____
B) Miscellaneous Revenue (Radio Fees/Other)	(B)\$ _____
C) Endowment \$1 per Ticket (\$1 per ticket sold)	(C)\$ _____
D) Gross Revenue (Line A+Line B minus Line C)	(D)\$ _____
E) NCHSAA Share (.25 X Line D)	(E)\$ _____
F) Check to NCHSAA = Line C + Line E	(F)\$ _____
G) Adjusted Gross = Line D minus Line E	(G)\$ _____
H) Game Expenses	
Officials (Only if visiting team travel <100 miles)	\$ _____
Miscellaneous	\$ _____
(please itemize)	
	Total Game Expenses (H)\$ _____
I) Net Gate (F-G)	(I)\$ _____
J) Team Shares (I/4)	(J)\$ _____

Date

A copy of this ticket accountability form/financial report and a check for the NCHSAA share (Line E) + the NCHSAA Endowment \$1 per ticket (Line C) must be in 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. Failure to complete this form within the ten day limit is subject to a fine.

Date received: _____ **Check #** _____ **Check Amount:** _____