

Wrestling Dual Team Championships State Championship

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.

Wrestling _____ _____ _____
 Sport Site Classification Date

Match

_____ VS. _____

Admission Tickets Sold

Beginning Number	Thru	Ending Number	+1=	Total Tickets Sold	@	Sale Price Each	=	\$ Value
	Thru		+1=		@	\$7.00	=	
	Thru		+1=		@	\$7.00	=	

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) NCHSAA Share (.25 x Line C)* | (D)\$_____ |
| E) Check to NCHSAA (Line B + Line D) | (E)\$_____ |
| F) Adjusted Gross (Line A minus Line E) | (F)_____ |
| G) Allowable Expenses (includes officials) **(MAX. \$500) | (G)\$_____ |
| H) Net Revenue (Line F minus Line G) | (H)\$_____ |
| I) Team Shares (H/2) | (I)\$_____ |

 Director's Signature School Name Date

A copy of this ticket accountability form/financial report and a check for the NCHSAA share (Line D) + \$1 per total # of tickets sold 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.

For office use only:

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