

GEORGIA HIGH SCHOOL ASSOCIATION
P.O. BOX 271
THOMASTON, GEORGIA 30286
706-647-7473
FAX: 706-647-2638

LACROSSE PLAYOFF FINANCIAL REPORT

CLASS: _____ BOYS PLAYOFFS GIRLS PLAYOFF
TEAMS: _____ VS _____
HOST: _____ DATE _____

GATE RECEIPTS:

Total Number of Tickets Sold _____ @ \$7.00..... _____
RECEIPT OF BROADCASTING FEES (radio and/or video tape delayed)..... _____
TOTAL RECEIPTS..... _____

Total Number Admitted with GHSA Pass _____

DEDUCTIONS:

(Note: Local service charges, stadium charges, lights, cost of operating personnel, etc., are not to be deducted prior to the division of funds. All such expenses are the responsibility of the home or host team.) **GHSA %, Officials Fees and Visiting Team mileage must be paid regardless of gate receipt amount.**

12% to GHSA (-) _____

Visiting Team Mileage (-) _____
(80 cents per mile one way)

Officials Fees (-) _____ (will be billed by Officials Association)

BALANCE: _____

½ to Visiting Team (plus mileage shown above) _____

½ to Host Team _____

(Signed)

(School)