

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

SOCCER PLAYOFF FINANCIAL REPORT STATE PLAYOFFS

(Begin using this form after Region/Area Winners are Determined)

CLASSIFICATION: _____ BOYS PLAYOFFS or GIRLS PLAYOFF

TEAMS: _____ VS _____

HOST: _____ DATE _____

GATE RECEIPTS:

Total Number of Tickets Sold _____ @ \$7.00 Admission Fee..... _____

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% of Total Receipts to GHSA _____

Officials Fees (add to GHSA 12% - **GHSA to pay officials**) _____ \$420.00

TOTAL: **Send one check to GHSA (12% share and Officials Payment)** _____

BALANCE: _____

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

BALANCE: _____

1/2 to Visiting Team (plus mileage shown above) _____

1/2 to Host Team _____

(Signed)

(School)

**Submit: Financial Report Form
Check** for the amount of
GHSA 12% and payment for
officials