

**GEORGIA HIGH SCHOOL ASSOCIATION**  
**Post Office Box 271**  
**Thomaston, Georgia 30286**  
**706-647-7473**

**TOURNAMENT FINANCIAL REPORT**  
**STATE VOLLEYBALL PLAYOFFS**  
**1<sup>st</sup> - 2<sup>nd</sup> - 3<sup>rd</sup> - 4<sup>th</sup> Rounds**

**CLASSIFICATION:** \_\_\_\_\_ **1<sup>st</sup> RND**    **2<sup>nd</sup> RND**    **3<sup>rd</sup> RND**    **4<sup>th</sup> RND**

**HOST TEAM:** \_\_\_\_\_ **VISITING TEAM:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**GATE RECEIPTS:**

Total Number of Tickets Sold \_\_\_\_\_ @ \$5.00 admission fee = \_\_\_\_\_

Receipt of Broadcasting Fees ..... \_\_\_\_\_

**TOTAL RECEIPTS:**..... \_\_\_\_\_

Total Number Admitted with GHSA Pass \_\_\_\_\_

**DEDUCTIONS:**

Note: Admission MUST be charged for all Volleyball Playoff Games  
 GHSA 12% share, visiting team mileage and Officials Fees must be paid regardless of gate receipt amount.  
 Send check for 12% and this form to GHSA.  
 Host school will receive an invoice from the Officials Association for payment of the officials.  
 Local service charges, facility costs, 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.

12% to GHSA	(-)	_____
Visiting Team Mileage (80 cents per mile one way)	(-)	_____
Officials Payment	(-)	_____ (will be billed by the Officials Association)

**BALANCE:**..... \_\_\_\_\_

1/2 to Visiting Team \_\_\_\_\_

1/2 to Host School \_\_\_\_\_

\_\_\_\_\_  
 (Signed – Person in charge of Tournament)