

GEORGIA HIGH SCHOOL ASSOCIATION
Post Office Box 271
THOMASTON, GA 30286
706 647-7473
706 647-2638 Fax

FINANCIAL REPORT SECTIONAL WRESTLING TOURNAMENTS (Traditional Wrestling Only)
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CLASS _____ SECTIONAL _____

HOST SCHOOL _____

DATE OF TOURNAMENT _____

of Tickets Sold _____ @ \$8.00 (Single Day) \$ _____

of Digital Tickets Sold _____ @ \$8.00 (Single Day) \$ _____

of Tickets Sold _____ @ \$14.00 (Two Day) \$ _____

of Digital Tickets Sold _____ @ \$14.00 (Two Day) \$ _____

of GHSA Passes _____

Gross Receipts \$ _____

Less Allowable Expenses (Set Amount Below) (-) \$ _____

Class A thru AAA (-\$600.00)

Class AAAA thru AAAAAA (-\$1000.00)

AMOUNT TO GHSA \$ _____

SIGNATURE (Person in charge of tournament)

Mail check with this report to GHSA at the above address.

DUE TEN (10) DAYS AFTER THE EVENT