

# FINANCIAL REPORT OF SANCTIONED EVENT

Name of Event \_\_\_\_\_ Date of Event \_\_\_\_\_

Site of Event \_\_\_\_\_  
City State Seating Capacity

Host School \_\_\_\_\_ Cosponsor, if any \_\_\_\_\_

***INCOME***

1. Ticket Receipts .....	\$	
2. Program Sales .....	\$	
3. Souvenir Sales .....	\$	
4. Program Advertisement .....	\$	
5. Sponsorships .....	\$	
6. Entry Fees .....	\$	
7. In-Kind Donations .....	\$	
8. Other Income (Please Itemize) .....	\$	
<b>TOTAL</b> .....	<b>\$</b>	

***EXPENSES***

1. Tournament Payroll/Personnel Costs .....	\$	
2. Value of Awards, Medals or Trophies to Players, Coaches and Teams .....	\$	
3. Value of T-shirts and Other Apparel/Gifts to Players, Coaches and Teams .....	\$	
4. Venue Rental .....	\$	
5. Team Travel Expenses .....	\$	
6. Team Room and Board .....	\$	
7. Insurance .....	\$	
8. Other Expenses (Please Itemize) .....	\$	
<b>TOTAL</b> .....	<b>\$</b>	

**ADVANCES, REIMBURSEMENTS AND OTHER PAYMENTS  
TO EACH PARTICIPATING SCHOOL:**

School _____	Amount \$	
School _____	Amount \$	
School _____	Amount \$	
School _____	Amount \$	

(Use additional sheets as necessary)

Were all schools, as well as their employees and agents, treated equally from a financial standpoint?  Yes  No

Financial Report Certified by:

Principal of Host School	Sign/Print Name	Date

Chief Financial Official for Event	Sign/Print Name	Date

Copies of this completed form will be forwarded by the NFHS to the State Associations of all participating schools.

Mail completed form within ninety (90) calendar days of the event to: the NFHS or to your state association office.  
 If the NFHS sanctioned the event, mail to: National Federation of State High School Associations, Attn: Sanctioning,  
 PO Box 20626, Kansas City, MO 64195-0626.