

GEORGIA HIGH SCHOOL ASSOCIATION
Post Office Box 271
Thomaston, Georgia 30286
706-647-7473 Fax: 706-647-2638

<p>TOURNAMENT FINANCIAL REPORT STATE VOLLEYBALL - FINALS Use for State Tournament Championship Round only Area Tournaments use the Region/Area Report Form 1st, 2nd, 3rd, 4th Rounds have separate form</p>

CLASS: _____

HOST SCHOOL: _____ **SITE:** _____

DATE OF TOURNAMENT: _____

Total Number Admitted with GHSA Pass ... _____

Number of Tickets Sold _____ @ \$8.00 \$ _____

Number of Digital Tickets Sold _____ @ \$8.00 \$ _____

Total Receipts.....\$ _____

(-)Less 20% to Host School for Expenses.... \$ _____

BALANCE (Submit check to GHSA) \$ _____

FOR GHSA USE ONLY	
Amount Submitted to GHSA	\$ _____
(-)GHSA – 12% of Gross Receipts	\$ _____
(-)Cost of Officials	\$ _____
(-)Misc. Expenses	\$ _____
Balance	\$ _____

(Signed – Person in charge of Tournament)

Mail check along with this report to GHSA at above address. **DUE FIVE (5) DAYS AFTER THE EVENT.**