NFHS FINANCIAL REPORT OF SANCTIONED EVENT

Name of Event			Date of Event	
Site of	Event			
	City	State		
Host School		Co-sponsor, 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)		\$	
	TOTAL		\$	
Expens	es			
1.	Tournament Payroll/Personnel C	Costs	\$	
2.	Value of Awards, Medals or Trop	ohies to Players, Coaches and Teams	\$	
3.	Value of T-shirts and Other App	arel/Gifts to Players, Coaches and Teams	\$	
4.	Venue Rental		\$	
5.	Team Travel Expenses		\$	
6.	Team Room and Board		\$	
7.	Insurance		\$	
8.	Sanctioning Fee		\$	
9.	Other Expenses (Please itemize	.)	\$	
	TOTAL		\$	
	for the event. ADVANCES, R	above portion of this form, you may attach general states and other payme each participating school:		
School		Amount	\$	
		Amount		
_		Amount	·	
		Amount		
(Use ad	ditional sheets as necessary)			
	I schools, as well as their employonal Report Certified by:	ees and agents, treated equally from a financial	standpoint? □ Yes □ No	
Principal	of Host School	Sign/Print Name	Date	
Chief Fin	nancial Officer for Event	Sign/Print Name	 Date	

Copies of this completed form will be forwarded by the NFHS to the involved State Associations.

Mail completed form upon request by the NFHS. Please mail to: National Federation of State High School Associations, Attn: Sanctioning Department, PO Box 690, Indianapolis, IN 46206.