FINANCIAL REPORT OF NFHS SANCTIONED EVENT

Name of Event_____ Date of Event _____

Site of Event_____ _____
City State Seating Capacity

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	$ 0.00

EXPENSES

1.	Tournament Payroll/Personnel Costs	$_____
2.	Value of Awards, Medals or Trophies to Players, Coaches & Teams	$_____
3.	Value of T-Shirts and Other Apparel/Gifts to Players, Coaches & Teams	$_____
4.	Venue Rental	$_____
5.	Team Travel Expenses	$_____
6.	Team Room & Board	$_____
7.	Insurance	$_____
8.	Other Expenses (Please Itemize)	$_____
	TOTAL	$ 0.00

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.

Mail completed form <u>upon request</u>. Please mail to: National Federation of State High School Associations, Attn: Sanctioning, P.O. Box 690, Indianapolis, Indiana 46206

FORM 10.1-D
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