



## KHSAA Semi-State Baseball Tournament Financial Report

KHSAA Form BA108  
Rev. 4/07

(return one copy and unsold tickets to KHSAA within one week of tournament.)

SemiState # 5 Held at St. Henry District High School Dates June 2 & 3

|                                            |                   |                                               |  |            |
|--------------------------------------------|-------------------|-----------------------------------------------|--|------------|
| <b>Part A. Ticket Sales Reconciliation</b> |                   |                                               |  |            |
| Color of Tickets -                         |                   | Orange                                        |  |            |
| Start Ticket Number (500 per roll)         | End Ticket Number | Sold                                          |  |            |
| 001001                                     | 001034            | 33                                            |  |            |
| 002001                                     | 002213            | 212                                           |  |            |
| 001501                                     | 001546            | 45                                            |  |            |
| 002501                                     | 002645            | 144                                           |  |            |
|                                            |                   | Total Sold                                    |  | 434        |
| Total Ticket Revenue (A-1)                 |                   | X selling price - \$7.00 = Total Ticket Sales |  | \$3,038.00 |

  

|        |                               |  |                |            |
|--------|-------------------------------|--|----------------|------------|
| Part B | OTHER REVENUE ITEMS           |  | Total Receipts | Total      |
| (1)    | Ticket Sales (from A-1 above) |  | \$3,038.00     |            |
| (2)    | Broadcasting                  |  | \$50.00        |            |
| (3)    | Sponsorship                   |  | 0              |            |
| (4)    | TOTAL REVENUE (4)             |  |                | \$3,088.00 |

  

|        |                                                                                               |  |          |          |
|--------|-----------------------------------------------------------------------------------------------|--|----------|----------|
| Part C | ALLOWABLE EXPENSE ITEMS PAID BY HOST PRIOR TO SUBMISSION TO KHSAA                             |  | Expenses |          |
| (1)    | Facility Rental (only if documented by contract and receipt and not on school owned property) |  | 0        |          |
| (2)    | Tournament Manager (agreed by participants, not to exceed \$75 per day of tournament)         |  | \$150.00 |          |
| (3)    | Field Preparation Labor (not to exceed \$75 per day)                                          |  | \$150.00 |          |
| (4)    | Field Preparation Supplies (include receipts)                                                 |  | \$ 63.49 |          |
| (5)    | Scoreboard and Scorebook Operators (not to exceed \$30 per game)                              |  | \$ 60.00 |          |
| (6)    | Public Address Announcers (not to exceed \$30 per game)                                       |  | \$ 60.00 |          |
| (7)    | Total for Gate Workers (not to exceed \$25 per day per worker)                                |  | \$ 50.00 |          |
| (8)    | Security (itemize per person cost on reverse)                                                 |  | 0        |          |
| (9)    | Certified Athletic Trainer (itemize per person cost on reverse)                               |  | 0        |          |
| (10)   | Other (itemize on back, prior KHSAA approval required)                                        |  |          |          |
| (11)   | Other (itemize on back, prior KHSAA approval required)                                        |  |          |          |
| (12)   | Other (itemize on back, prior KHSAA approval required)                                        |  |          |          |
| (13)   | Other (itemize on back, prior KHSAA approval required)                                        |  |          |          |
| (14)   | TOTAL EXPENSES (14)                                                                           |  |          | \$533.49 |

  

|        |                                                                                                                      |  |  |           |
|--------|----------------------------------------------------------------------------------------------------------------------|--|--|-----------|
| Part D | First Line Net Profit (Part B (4) minus Part C (14) total) to be sent to KHSAA. All other bills to be paid by KHSAA. |  |  | \$2554.51 |
|--------|----------------------------------------------------------------------------------------------------------------------|--|--|-----------|

**PAID ATTENDANCE BY SESSIONS**  
(Tickets Sold NOT money received)

| Session       | Paid |
|---------------|------|
| 1             | 245  |
| 2             | 189  |
| 3 (if needed) | N/A  |
| Total         | 434  |

**Umpire Mileage Driven**

(List only actual driven, use round-trip totals)

**ATTACH ANY LODGING RECEIPTS IF APPROVED**

| Umpire                | Day 1 | Day 2 | Other |
|-----------------------|-------|-------|-------|
| James David Hall      |       | 110   |       |
| Will Begley           | 110   |       |       |
| William Brent Bradley |       |       |       |
| Kyle Mink             | 300   | 300   |       |

Jay Graue  
MANAGER

St. Henry District  
HOST SCHOOL

859-525-0255  
DAYTIME PHONE

513-607-6176  
CELL PHONE

|                                            |              |                  |          |
|--------------------------------------------|--------------|------------------|----------|
| Please make checks payable to: Jansen Turf |              |                  |          |
| Inv. Date:                                 | 3/19/09      | Total:           | 117.00   |
| Due Date:                                  | upon receipt | Tax I.D. #:      |          |
| Invoice #:                                 | 920          | F-8846           |          |
| Customer #:                                | 745          | Pay This Amount: | \$117.00 |



St. Henry

KHSAA Form GE11  
Rev. 5/06

## KHSAA Event Ticket Reconciliation Report

Event Title (session) **Semi-State 5 Baseball**

| (A) Color<br>Orange | Price<br>\$7.00 |            |
|---------------------|-----------------|------------|
| Start               | End             | Sold       |
| 001001              | 001034          | 33 ✓       |
| 001501              | 001546          | 45 ✓       |
| 002001              | 002213          | 212 ✓      |
| 002501              | 002645          | 144 ✓      |
|                     |                 |            |
|                     |                 |            |
|                     |                 |            |
|                     |                 |            |
|                     |                 |            |
|                     |                 |            |
|                     |                 |            |
| Total Sold          |                 | 434        |
| Price Per Ticket    |                 | \$7        |
| Projected Total     |                 | \$3,038.00 |

| (B) Color        | Price |      |
|------------------|-------|------|
| Start            | End   | Sold |
|                  |       |      |
|                  |       |      |
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|                  |       |      |
|                  |       |      |
| Total Sold       |       |      |
| Price Per Ticket |       |      |
| Projected Total  |       |      |

| (C) Color        | Price |      |
|------------------|-------|------|
| Start            | End   | Sold |
|                  |       |      |
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|                  |       |      |
| Total Sold       |       |      |
| Price Per Ticket |       |      |
| Projected Total  |       |      |

| (D) Color        | Price |      |
|------------------|-------|------|
| Start            | End   | Sold |
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|                  |       |      |
|                  |       |      |
| Total Sold       |       |      |
| Price Per Ticket |       |      |
| Projected Total  |       |      |

**Reconciliation**

|                        | (A) | (B) | (C) | (D) | Total |
|------------------------|-----|-----|-----|-----|-------|
| Total Sold             |     |     |     |     |       |
| Total Ticket Projected |     |     |     |     |       |
| Cash Deposit           |     |     |     |     |       |
| Cash Over (Short)      |     |     |     |     |       |

Manager Signature J. Graw

Date 6-4-09



## ORDER DATE:

COVINGTON SPORT CENTER SINCE 1945  
525 MADISON AVENUE, COVINGTON, KY 41011  
PH: (859) 581-6648 FAX: (859) 581-7117

SHIPT  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 CUSTOMER PO # \_\_\_\_\_

|            |               |         |
|------------|---------------|---------|
| ORDER DATE | DATE REQUIRED | SOLD BY |
|------------|---------------|---------|

[illegible]