



Semi-State Tournament Financial Report
(return this form, unsold tickets and the calculated first line net profit to the KHSAA within one week of tournament)

KHSAA Form
SO112
Rev. 05/12

Gender (check one) Boys ☒ Girls ☐
Held at BOONE COUNTY Date 10-23-12
Home Team BOONE COUNTY Visiting Team HARRISON COUNTY

SECTION A. Ticket Sales Reconciliation				
Roll	Color of Tickets	Start Ticket Number	First Ticket Remaining on Roll	Sold
(1)	GREEN	29364	29722	358
(2)	GREEN	31269	31666	397
(3)				
(4)				
				Total Sold
				755
				Selling Price
				7.00
				(A1) TOTAL TICKET SALES
				5,285

SECTION B. Revenue Reconciliation		
Total Ticket Sales (from A1 above)		5,285
Broadcasting Fees - Home Team (list outlets and amount)		X
Broadcasting Fees - Visitors (list outlets and amount)		X
(A2) GRAND TOTAL REVENUE		5,285

SECTION B. ALLOWABLE EXPENSE ITEMS PAID BY HOST PRIOR TO SUBMISSION TO KHSAA	Expenses	
Facility Rental (only if documented by contract and receipt and not on member school owned property)	X	
Security (itemize per person below)	X	
Other (provide detail below, prior KHSAA approval required)		
Other (provide detail below, prior KHSAA approval required)		
Other (provide detail below, prior KHSAA approval required)		
Other (provide detail below, prior KHSAA approval required)		
(A3) TOTAL EXPENSES		
FIRST LINE NET PROFIT (A2- A3). THIS AMOUNT SHOULD BE FORWARDED TO KHSAA. ALL OTHER BILLS AND PERSONNEL WILL BE PAID BY KHSAA.		

OFFICIAL'S NAMES AND APPLICABLE MILEAGE

(Permission from KHSAA necessary to record mileage for second or additional driver)

Official's Name <u>MICHAEL MARX-REF.</u>	Round Trip Mileage
<u>ALEJANDRO VELA AST. REF. 2</u>	
<u>JOHN SMITH AST. REF. 1 - DRIVER OWED MILEAGE</u>	<u>\$156.70</u>
<u>4th OFFICIAL - JOHN MENARD</u>	

PROVIDE DETAIL FOR ANY ADDITIONAL EXPENSES AND THEN TRANSFER TOTALS TO SECTION B ABOVE

Tom SA
MANAGER

BOONE COUNTY
HOST SCHOOL

859-282-5055
DAYTIME PHONE

859-630-7328
CELL PHONE