(KHSAA)

KHSAA District Tournament Financial Report

(return to KHSAA by published deadlines. File separate reports if Girls and Boys Tournaments held separately in the specific sport

Event (check one) Baseball Basketball Soccer Softball X Volleyball						
District # 36 Boys Girls X Combined						
Held at	ld at Newport Veterans Memorial Park Dates 5/15, 5/17, 5/18/23					
Part A	REVENUE ITEMS	Price(s)	Receipts	Totals		
	Ticket Sales	5.00	44			
	Broadcasting					
	Sponsorship					
	Per Team Entry Fee Charged by Host					
	TOTAL REVENUE (1)			220.00		
Part B	EXPENSE ITEMS		Expenses			
	Game Officials		936			
	Trophies		26221			
	Travel for Participating Teams					
	Other Itemized Expenses approved in advance by	100				
	majority vote of schools in tournament (provide					
	separate listing or list on back of this form)					
	TOTAL EXPENSES (2)			1198.21		
Part C	Net Profit (Part A (1) minus Part B (2) total)			-978.21		
Part D	Allowance to Host School - Maximum 15% for					
	rental and incidental expenses unless otherwise					
	approved by majority vote					
Part E	Profit Subject to Division by Schools (Part C minus			-978.21		
	Part D)					
LIST BELOW INDIVIDUAL AMOUNTS FOR DISTRICT TOURNAMENT NET PROFITS FROM PART E						

LIST BELOW INDIVIDUAL AMOUNTS FOR DISTRICT TOURNAMENT NET PROFITS FROM PART E ABOVE, NOT INCLUDING TRAVEL EXPENSES

School	Amount	School	Amount
Highlands HS	-195.65	Newport HS	-195.65
Dayton HS	-195.65	Newport Central Catholic HS	-195.65
Bellevue HS	-195.65		

PAID ATTENDANCE BY SESSIONS (Tickets Sold NOT money received)

PAID ATTENDANCE

Session	Paid
1	20
2	16
3	8
Total	44

** NOTE ** IF ANY OTHER PLAN FOR THE DIVISION OF TOURNAMENT RECEIPTS IS USED, A MAJORITY VOTE OF THE PARTICIPATING SCHOOLS MUST BE OBTAINED, DOCUMENTED, AND SENT TO THE KHSAA.

MANAGER WILLIAMS

Dayton High School

859-292-7486 ext 5030

SCHOOL

DAYTIME PHONE

SCHOOL ACTIVITY FUND STANDARD INVOICE

School		Date	
Activity Account			
	D		Are you an employee
Vendor's Name	Dayton H.S.	Y N	of this school district
Address	200 Greendan) Lane		
Phone	Dayton KY 41074		
Fax	· · ·		
FEIN or Social Security No.	WI-0001401		
Quantity	Item Description	Unit Cost	Total Cost
	District 36 Softball loss	195.65	195.65
	Share		
THE RESIDENCE OF THE PROPERTY			
		Total	195.65
	Vendor's Certification		
I hereby certify that the	above is a correct statement of amount due from the abo	ove named sch	ool for articles
furnished or services re			0115.00
	Vendor Sign	MD_ ature	DHZHD
	Approval for Payment		
	Amount Paid:		
Sponsor	Date Paid:		
Principal	COUNT TO CONTROL OF COUNTY AND		
ann i b b i i	Check No.:		

^{*}Form to be used any time invoice not provided

^{*}For use with check refunds*