

TENNESSEE SECONDARY SCHOOL ATHLETIC ASSOCIATION

Division I Basketball Sectional Financial Report

CLASS: _____ BOYS/GIRLS: _____ HOME TEAM: _____
VISITING TEAM: _____

RECEIPTS

_____ Tickets Sold @ \$7.00 (Host School) \$ _____ (1)
_____ Live (\$500) / Delayed (\$250) Telecast (Including Internet Videostream) \$ _____ (2)
TOTAL RECEIPTS (LINES 1-2) \$ _____ (3)

EXPENDITURES

Game Director: _____ \$ 25.00 (4)
Scorer: _____ \$ _____ (5)
Timer: _____ \$ _____ (6)
Other Expenses:
1. _____ \$ _____ (7)
2. _____ \$ _____ (8)
3. _____ \$ _____ (9)
4. _____ \$ _____ (10)

ITEMIZED GAME FEES & MILEAGE FOR OFFICIALS

NOTE: Assigning Officer from the local officials' association assigned to the game can confirm mileage totals if needed.

Name (Please Print)	Game Fee	Miles (Round Trip)	Total
Official _____	\$60.00 + _____	@ 15¢ / mile	\$ _____ (11)
Official _____	\$60.00 + _____	@ 15¢ / mile	\$ _____ (12)
Official _____	\$60.00 + _____	@ 15¢ / mile	\$ _____ (13)
TOTAL OFFICIAL'S FEES (ADD LINES 11, 12, & 13)			\$ _____ (14)

TOTAL EXPENSES (ADD LINES 4, 5, 6, 7, 8, 9, 10, 11, 12, & 13) \$ _____ (15)
NET TO BE MAILED TO TSSAA (SUBTRACT LINE 15 FROM LINE 3) \$ _____ (16)

Signature of Game Director: _____ Date: _____

To Game Director: Mail one copy of this report and Net Receipts (Line 16) to: TSSAA, P.O. Box 319, Hermitage, TN 37076. TSSAA will complete the bottom of this form and issue checks for expenses listed below. TSSAA will return a copy of the complete form to each school along with their check.

(DO NOT WRITE BELOW THIS LINE. FOR TSSAA OFFICE USE ONLY)

NET RECEIPTS FROM GAME DIRECTOR \$ _____

EXPENDITURES

10% Net to Help Defray Cost of Catastrophic Insurance \$ _____
Tickets: _____ \$ _____
Team Allotment for Visiting School \$ _____
TOTAL EXPENDITURES \$ _____
NET \$ _____
1/3 NET TO HOME TEAM: _____ \$ _____
1/3 NET TO VISITORS + TEAM ALLOTMENT: _____ \$ _____
1/3 NET TO TSSAA \$ _____