

**TENNESSEE SECONDARY SCHOOL ATHLETIC ASSOCIATION
Division II Basketball Sub-State Financial Report**

CLASS: _____ **BOYS/GIRLS:** _____
VISITORS: _____ **HOME:** _____

RECEIPTS

_____ Tickets @ \$6.00 \$ _____
 _____ Delayed TV or Cable Broadcast \$ _____
TOTAL RECEIPTS: \$ _____

EXPENDITURES

Game Director: _____ \$ 25.00
 Scorer: _____ \$ _____
 Timer: _____ \$ _____
 Other Expenses:
 1. _____ \$ _____
 2. _____ \$ _____
 3. _____ \$ _____
 4. _____ \$ _____
TOTAL EXPENSES: \$ _____
NET: \$ _____

Signature of Director: _____

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

.....
 (Do not write below this line. For TSSAA office use only).

NET RECEIPTS FROM GAME DIRECTOR \$ _____

EXPENDITURES

Official: _____ \$ _____
 Official: _____ \$ _____
 Official: _____ \$ _____
 10% Net to Help Defray Cost of Catastrophic Insurance \$ _____
 Tickets: _____ \$ _____
 Team Allotment: _____ \$ _____
TOTAL: \$ _____
NET: \$ _____
 1/3 Net To: _____ High School \$ _____
 1/3 Net To: _____ High School \$ _____
 1/3 Net to: TSSAA \$ _____