

TENNESSEE SECONDARY SCHOOL ATHLETIC ASSOCIATION

Division I Football First Round Play-Off Financial Report

VISITOR: _____ HOME: _____ CLASS / GAME #: _____ *

*Game # can be found on the brackets posted online at tssaa.org.

NOTE: 25% of the TOTAL GROSS RECEIPTS shall go to the host team. The host team is responsible for all on-site expenses. 25% of the TOTAL GROSS RECEIPTS shall be sent to the visiting team. The visiting team is responsible for all of their travel expenses. 50% of the TOTAL GROSS RECEIPTS less officials' game fees and officials' mileage expenses shall be sent to TSSAA. TSSAA is responsible for paying line-to-gain crews, tickets, awards, and catastrophic insurance.

RECEIPTS

_____ Tickets Sold @ \$8.00 (Host School) \$ _____ (1)

_____ Live (\$750) / Delayed (\$250) Telecast (Including Internet Videostream) \$ _____ (2)

TOTAL GROSS RECEIPTS \$ _____ (3)

25% OF GROSS RECEIPTS RETAINED BY THE HOME TEAM \$ _____ (4)

25% OF GROSS RECEIPTS TO BE MAILED TO THE VISITING TEAM \$ _____ (5)

50% OF GROSS RECEIPTS \$ _____ (6)

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 (One Way)	Total
Referee	_____	\$100.00 + _____	@ 30¢ / mile	\$ _____ (7)
Umpire	_____	\$90.00 + _____	@ 30¢ / mile	\$ _____ (8)
Linesman	_____	\$90.00 + _____	@ 30¢ / mile	\$ _____ (9)
Line Judge	_____	\$90.00 + _____	@ 30¢ / mile	\$ _____ (10)
Back Judge	_____	\$90.00 + _____	@ 30¢ / mile	\$ _____ (11)
ECO	_____	\$60.00 + _____	@ 30¢ / mile	\$ _____ (12)
TOTAL OFFICIAL'S FEES (LINES 7-12)				\$ _____ (13)

AMOUNT TO BE MAILED TO TSSAA (LINE 6 – LINE 13) \$ _____ (14)

To the Game Director:

1. Mail one copy of this report and check to TSSAA, 3333 Lebanon Rd., P.O. Box 319, Hermitage, TN 37076. Please be sure to return unsold tickets and the ticket record form showing the number of tickets received, sold, and returned.
2. Mail a copy of this report and a check for 25% of the Gross Receipts (Line 5) to the visiting team.

Signature of Game Director: _____ Date: _____