



**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. 6/15

Gender (check one)      Boys       Girls   
 Held at \_\_\_\_\_ Date \_\_\_\_\_  
 Home Team \_\_\_\_\_ Visiting Team \_\_\_\_\_

<b>SECTION A. Ticket Sales Reconciliation</b>				
Roll	Color of Tickets	Start Ticket Number	First Ticket Remaining on Roll	Sold
(1)				
(2)				
(3)				
(4)				
			Total Tickets Sold	
			Selling Price	
			<b>(A1) TOTAL TICKET SALES</b>	

<b>SECTION B. Revenue Reconciliation</b>		
Gross Total Ticket Sales (from above)		
Broadcasting Fees – Home Team (list outlets and amount)		
Broadcasting Fees – Visitors (list outlets and amount)		
Entry Fee Paid by Opponent		
<b>(A2) GRAND TOTAL REVENUE</b>		

<b>SECTION C. ALLOWED EXPENSE ITEMS PAID BY HOST PRIOR TO SUBMISSION TO KHSAA</b>	Expenses	
(provide detail below, prior KHSAA approval required)		
(provide detail below, prior KHSAA approval required)		
(provide detail below, prior KHSAA approval required)		
(provide detail below, prior KHSAA approval required)		
<b>(A3) TOTAL ALLOWABLE EXPENSES PREPAID BY HOST</b>		

<b>FIRST LINE NET PROFIT (A2-A3). THIS AMOUNT SHOULD BE FORWARDED TO KHSAA. ALL OTHER EXPENSES AND PERSONNEL WILL BE PAID BY KHSAA UPON APPROVAL</b>		
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**OFFICIAL'S NAMES AND APPLICABLE MILES DRIVEN**  
 (Permission from KHSAA necessary to record miles for second or additional driver)

Official's Name	Round Trip Miles

**PROVIDE DETAIL FOR ANY ADDITIONAL EXPENSES, THEN TRANSFER TOTALS TO SECTION C ABOVE**

MANAGER \_\_\_\_\_ HOST SCHOOL \_\_\_\_\_ DAYTIME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_