

For LHSAA Use Only  
PAID

Check No. \_\_\_\_\_  
Check Date \_\_\_\_\_  
Amount \_\_\_\_\_

# LHSAA SOFTBALL PLAYOFF

## Financial Report

For LHSAA Use Only

Class \_\_\_\_\_  
Game Date \_\_\_\_\_  
**Check One:**  
Bi-District \_\_\_\_\_  
Regional \_\_\_\_\_  
Quarter Final \_\_\_\_\_

Home School \_\_\_\_\_

vs.

Visiting School \_\_\_\_\_

<b>Advanced and Season Ticket Sales</b> <i>(both schools)</i>	
<b>Radio and/or TV Broadcast Revenue</b> <i>(if applicable)</i>	+
<b>Gate Ticket Sales</b>	+
<b>TOTAL GROSS RECEIPTS</b>	=
<i>Less: Officials' Fees / Officials' Travel</i>	(- )
<b>NET RECEIPTS</b>	=
<b>Total Due to Visiting Team:</b> <b>50% of Gross Receipts</b>	*** \$
<b>Total Due to Home Team:</b> <b>50% of Gross Receipts</b>	\$

**NOTE:** Home team is responsible for official scorer, ticket takers and sellers, security, ground crew, game balls, and other items necessary to conduct game. Visiting team is responsible for their own travel expenses.

_____ Tickets Sold at \$_____
_____ Comp Tickets
_____ Total Attendance

\_\_\_\_\_  
**Signature – Host Principal**

Date: \_\_\_\_\_

**DO NOT SENT THIS FORM TO THE LHSAA**

**Send a Copy of the Financial Report to the Visiting Team  
with Their Share of Gross Receipts\*\*\***