

VB-R**VOLLEYBALL SUB-STATE FINANCIAL REPORT****CLASS** _____ **REGION #** _____

Site(s) of Tournament _____

Financial reports must be inclusive. Please submit only ONE statement per region. Multiple sites must be included on ONE financial report.**RECEIPTS:**

Adult Sales _____ @ \$5.00..... \$ _____
 Student Sales _____ @ \$3.00..... \$ _____
 Sales of Tournament Volleyballs..... \$ _____ (if applicable)
TOTAL RECEIPTS..... \$ _____

SDHSAA PERCENTAGE:Region – **40%** of gross receipts..... \$ _____**SUBTOTAL: Total Receipts Less SDHSAA percentage: \$ _____****EXPENDITURES:**

Committee Expense	\$ _____	
Team Mileage	\$ _____	➔ (Teams - Mileage \$)
Officials (certified)	\$ _____	_____
Line judges	\$ _____	_____
Scorers - Timer - Announcer	\$ _____	_____
Ticket Sellers and Takers	\$ _____	_____
Scorebook - Balls	\$ _____	_____
Medals and Trophies	\$ _____	_____
Advertising and Printing	\$ _____	_____
Custodial	\$ _____	_____
Rental Expense	\$ _____	
Hospitality	\$ _____	
Administrative - Supervision	\$ _____	
Miscellaneous (tickets, postage, passes, phone)	\$ _____	
Other Expenses (please specify)	\$ _____	
_____	\$ _____	
_____	\$ _____	

TOTAL EXPENDITURES \$ _____**TOTAL PROFIT OR LOSS (circle one) \$ _____**

	SCHOOL	SHARE OF PROFIT AND/OR EXPENSE	OTHER	TOTAL
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
	TOTALS	_____	_____	_____

Signature indicates that this report includes all sites for this region._____
Signature of Chairman_____
Date