



Southeast District Athletic Board

Sectional Game/Contest Report

Sport: _____ Tournament Site: _____ Date: _____

Opponent: _____ Division: _____

Ticket Report: Beginning Ticket #: _____ Ending Ticket #: _____

Total Tickets Sold: _____ Ticket Price: _____
 Ticket Revenue _____

OPERATING EXPENSES:

Officials Expenses:

Name	Game Fee	Travel Allowance	Total Paid to Official
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
			Total Cost for Officials _____

Game/Contest Personnel

Name	Position	Fee	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
			Total Cost Personnel _____

**** Not to Exceed \$75.00**

TOTAL TICKET REVENUE _____

TOTAL COST OFFICIALS - _____

TOTAL COST PERSONNEL - _____ **** Not to Exceed \$75.00**

PROFIT/LOSS _____

HOST SCHOOL SITE COORDINATOR SIGNATURE _____

COMPLETE THIS REPORT FOR EACH TOURNAMENT GAME/CONTEST AND RETURN FOR APPROVAL TO:

Southeast District Athletic Board		Eastern Local School District
Rick Edwards, Treasurer	or	Rick Edwards
34621 Crew Road		50008 SR 681
Pomeroy, OH 45769		Reedsville, OH 45772
el_redwards@seovec.org		

Attach Beginning and Ending Ticket to this Report