

FALL BASEBALL STATE- FINANCIAL REPORT



SITE: _____

Date: _____
Round: _____
Class: _____

CASH SALES AT HOST SITE

Number of Cash Tickets Sold	_____ X\$13.00	Total Income (1)	_____
Number of Cash Tickets Sold	_____ X\$3.00	School Site Income (2)	_____
		(Line 1 - Line 2) Reportable Income (3)	_____

Local Site Expense

Please itemize expenses (you may attach a separate sheet to show expenses)

Umpires	_____
Baseballs	_____
Workers	_____
Gate Workers	_____
Total Expenses (4)	\$ _____

(Line 3 - Line 4) Net Income Due to OSSAA \$ _____
If negative then 75% of loss on umpires and
baseballs will be refunded to the school

SITE MANAGER: _____
I certify that to the best of my knowledge this report is correct. (Please sign)

PRINTED NAME: _____

DATE: _____

PLEASE EMAIL TO RUSSELL IVES [rives@ossaa.com]