



WYOMING HIGH SCHOOL ACTIVITIES ASSOCIATION
 6571 EAST 2ND STREET
 CASPER, WYOMING 82609
 PHONE 307-577-0614 FAX 307-577-0637
 WEBSITE: www.whsaa.org

INCOME STATEMENT

DATE OF EVENT: _____ CLASS: _____

LOCATION: _____ LEVEL: _____

DIRECTOR: _____ SPORT: _____

PLEASE COMPLETE THIS FORM AND SEND THE TOTAL GROSS REVENUES TO THE WHSAA OFFICE IMMEDIATELY so that the host school's bid amount or twenty percent can be forwarded as soon as possible.

TOTAL GATE REVENUES \$ _____

ADVANCE TICKET SALES _____

OTHER (VOUCHERS) _____

TOTAL GROSS REVENUES _____
 (SEND THIS AMOUNT TO THE WHSAA)

OUR COUNTY SALES TAX IS _____%
 (THE WHSAA OFFICE NEEDS THIS INFORMATION TO FIGURE THE PROPER SALES TAX.)

 TOURNAMENT DIRECTOR'S SIGNATURE

WHSAA OFFICE USE ONLY	
TOTAL GROSS REVENUES	\$ _____
SALES TAX PAID	_____
BID AMOUNT OR 20% PAID	_____
ADJUSTED GROSS REVENUE	_____
PAID 20% DATE: _____	CHECK # _____ AMOUNT: _____