



PIAA DISTRICT ONE – PLAYOFF CONTEST REPORT

Home Playoff Sites / Higher Seed rev.2/1/26

CONTEST DATE: ____ / ____ / ____ SPORT: _____ GAME # on BRACKET _____

HOST SCHOOL _____ OPPONENT _____

GAME MANAGER: _____ TOTAL GAME WORKER EXPENSES REIMBURSEMENTS: \$ _____

ONLINE TICKET INFORMATION AND TICKET RECEIPTS

(to be filled out by Game Manager)

<u>ONLINE GAME TICKETS</u>	<u>CASH SALES</u>
On-Line Tickets Sold: _____	Cash Tickets Sold: _____
Tickets Scanned: _____	Cash Deposited Date: _____
	(be sure to send copy of bank deposit receipt)
Additional Receipts / Media Fees: _____	<i>(to be filled out by D1 Office)</i>
	Gross Game Receipts: \$ _____

GAME MGR / ATHLETIC DIRECTOR SIGNATURE: _____ / _____ / _____

Reviewed by District One Executive Director: _____ / _____ / _____

Reviewed by District One Treasurer: _____ / _____ / _____

Submit completed reports to District One Office

PIAA DISTRICT ONE PLAYOFF CONTEST FINANCIAL REPORT

please print legibly

Game Manager – Name	Mailing Address	SS # (if not on file with D1)	Signature

School / School District	Mailing Address

ADDITIONAL EXPENSES EXPECTED

List below any expenses NOT PAID at the game such as Security, Police Ambulance, Game Site Expenses. Invoices must include the EIN or SSN. The supplier/vendor will submit an invoice to the game manager or directly to District One c/o: Executive Secretary PIAA District One P.O. Box 925 Doylestown, PA 18901

	Print Vendor/Supplier Name	Position/Duty	\$ Estimated Amount
1.			
2.			
3.			
4.			
5.			

Game Number: _____

Sport: _____

PIAA DISTRICT ONE PLAYOFF CONTEST FINANCIAL REPORT
GAME WORKER DISBURSEMENTS

Game Number: _____ Sport: _____ Date & of Contest: _____ Site of Contest: _____

	Print Name	Position/Duty	Amount	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
Total paid to Game Workers			\$	Game Mgr. Initials:

PIAA DISTRICT ONE PLAYOFF CONTEST FINANCIAL REPORT**PIAA GAME OFFICIALS**

(list officials and sign this form / use additional sheets as needed / official's address – not required)

	Print Name	Position/Duty	\$ Amount	Signature
1.		PIAA Officials	Approved by D1	
2.		PIAA Officials	Approved by D1	
3.		PIAA Officials	Approved by D1	
4.		PIAA Officials	Approved by D1	
5.		PIAA Officials	Approved by D1	
6.		PIAA Officials	Approved by D1	
7.		PIAA Officials	Approved by D1	
8.		PIAA Officials	Approved by D1	
9.		PIAA Officials	Approved by D1	
10.		PIAA Officials	Approved by D1	

Game Mgr. Initials: _____

Game Number: _____

Sport: _____