

TICKET RECEIPTS REPORT

School _____

Date _____

Game _____

Amount of Change Issued \$ _____

Check Issued for Change (No.) _____

Signature of Event Sponsor (I acknowledge that I am personally responsible for the change and ticket sales revenue until ALL funds are verified and accepted by the Bookkeeper)

Receipt Issued for Change (No.) _____

Signature of Bookkeeper (I acknowledge that I am personally responsible for change and ticket sales revenue until ALL funds have been deposited into the school activity bank account)

Receipt for Gate Receipts (No.) _____

 Signature of Principal

Name of Seller	Starting Number When Turned In	Starting Number When Issued	Number Sold	Ticket Price	Total Tickets Sales	Amount of Change Issued	Total to be Accounted For	Amount Turned In	Over or Short
TOTAL									

*The amount turned in less cash payments must equal the amount of the deposit.