

# MINNESOTA STATE HIGH SCHOOL LEAGUE

## Region 7AA SECTION TOURNAMENT REPORT (APPENDIX L)

Date of Event	Activity & Level of Tournament	Section #
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<b>To: Tournament Manager/Coordinator/Site Manager</b> This form must be completed and submitted <b>IMMEDIATELY (within one week)</b> following the conclusion of your tournament to:	<b>(Region Secretary Name &amp; Address)</b> Tom Lenarz Executive Secretary/Treasurer 7AA 1123 Summit Ave., Cloquet, MN 55720
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<b>Tournament Location &amp; Site Manager:</b>			
School Address:		City/State/Zip:	
Phone:		Email:	

**PARTICIPATION REPORT: LIST PARTICIPATING SCHOOLS:**


**GAME RESULTS**

<b>Team</b>	<b>Score</b>	<b>VS</b>	<b>Team</b>	<b>Score</b>	
<b>Team</b>	<b>Score</b>	<b>VS</b>	<b>Team</b>	<b>Score</b>	

### TICKET REPORT

STUDENT	Beginning Ticket Number	Ending Ticket Number	Tickets Sold	Price		Amount
				@ \$	=	\$
				@ \$	=	\$
				@ \$	=	\$
				@ \$	=	\$
	<b>Total Student</b>	<b>Receipts</b>		@ \$	=	\$

ADULT	Beginning Ticket Number	Ending Ticket Number	Tickets Sold	Price		Amount
				@ \$	=	\$
				@ \$	=	\$
				@ \$	=	\$
				@ \$	=	\$
	<b>Total Adult</b>	<b>Receipts</b>		@ \$	=	\$

TOTAL STUDENT RECEIPTS		+	TOTAL ADULT RECEIPTS		TOTAL GAME RECEIPTS	=	\$
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**Remit the total receipts to the Region Secretary. DO NOT make any payments from game receipts.**

### Summary of event & recommendations for next year's tournament

**EXPENSES:**

<b><i>District Employee Game Workers</i></b>			
	<b>Name</b>	<b>Amount</b>	<b>Assignment</b>
	<b>District Employees SUB TOTAL →</b>		<b>← Fill in \$\$ Amount</b>
	<b>TAX BENEFITS ( )% =</b>		<b>← Fill in \$\$ Amount</b>
	<b>District Employees TOTAL →</b>		<b>← Fill in \$\$ Amount</b>
<b><i>Non-District Employee Game Workers</i></b>			
	<b>Name</b>	<b>Amount</b>	<b>Assignment</b>
<b>DO NOT</b>			
<b>INCLUDE</b>			
<b>ANYONE</b>			
<b>FILLING</b>			
<b>OUT AN</b>			
<b>ICF</b>			
<b>Examples:</b>			
<b>Refs or</b>			
<b>Trainers</b>			
	<b>NON - District Employees TOTAL →</b>		<b>← Fill in \$\$ Amount</b>
	<b>Food (if applicable)TOTAL →</b>		<b>← Fill in \$\$ Amount</b>
	<b>Police / Rent / Other (if applicable)TOTAL →</b>		<b>← Fill in \$\$ Amount</b>
	<b>GRAND TOTAL →</b>		<b>← Fill in \$\$ Amount</b>
	<b><u>Payable to Who:</u></b>		

\_\_\_\_\_  
 Signature of Tournament Manager/Coordinator or Site Manager Date: \_\_\_\_\_

I received this document, from the Coordinator/Tournament Manager or Site Manager, and I find it to be accurate.

Region Secretary Signature: Tom Lenarz Date: \_\_\_\_\_

- Individual Checks Requests. Documentation Procedures**
- **Officials.** Completed Independent Contract Form (Appendix R)
  - **Trainers.** Completed Independent Contracts or Included on Worker list above.
  - **Paychex.** Part Time Employment Contract (Appendix V)
    - (W-4 & I-9 forms must be on file with Region 7AA).
  - **Food Allowance.** Invoice, Voucher, or Sales Slip
  - **Police/Rent/Supplies/other Outside Vendors.** Voucher/Invoice/Sales Slips/Bill.