

United States Amateur Boxing, Inc.

Financial Statement For Competition



Name of Sanction Holder _____

Name of Host Organization, (if different) _____

Local Boxing Committee _____

Name of Event _____ Date _____

ATHLETE ENTRY FEES Entry Fee \$ _____ Number of athletes _____ **Total \$** _____

TICKETS

Number of \$ _____ Tickets sold _____ Income \$ _____

Number of \$ _____ Tickets sold _____ Income \$ _____

Number of \$ _____ Tickets sold _____ Income \$ _____

Total Gate: \$ _____

CONCESSION SALES (net to event) \$ _____

PROGRAMS

Number of Programs sold..... _____ Income \$ _____

Advertising Sales..... _____ Income \$ _____

Total Program Income: \$ _____

Grand Total of Revenue: \$ _____

LESS SANCTION FEE TO LOCAL BOXING COMMITTEE (if applicable)

\$ _____

REMAINING BALANCE.....\$ _____

LESS APPROVED EXPENSE (attachment must be

completed)....

.....\$ _____

TOTAL PROCEEDS TO BE DISTRIBUTED between

Event Host and other parties_____

\$_____

Verified by_____

Signature of Person Responsible

Address_____

City_____ State_____ Zip_____

Phone H: ()_____ W: ()_____ C: ()_____

EVENT EXPENSES

Venue Fee/Rental_____

Equipment/Ring_____

Doctor fees_____

Security/Police _____

Ticket/Printing _____

Food/Beverage_____

Advertising

Total_____

Posters_____

Radio_____

Mail_____

Newspaper_____

Internet_____

Other_____ (describe)_____

Miscellaneous

Describe

Total Event Expense