

Signature of Manager

2016-17 Financial Report for IHSA Speech Drama and Group Interpretation Sectional Contest

Illinois High School Association 2715 McGraw Dr., Bloomington, IL 61704 Phone: 309-663-6377

		High School
City		Zip
RECEIPTS		
	\$	
	\$	
	GROSS RECEIPTS	\$
	00 per performance judged.	
Address		Fee
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	Total Other Expenses	\$
		;
		ne \$
	or Defic	
	RECEIPTS	RECEIPTS \$ \$ GROSS RECEIPTS: EXPENDITURES s. Group Interpretation\$15.00 per performance judged. Address Total Other Expenses: Total Expenditures S Net Incon

Signature of Principal

articipating Schools		Event Entry Fees
		== 2 =, . 200
	Total Event Entry Fees	
lease list the schools who did not pay fees (penalty or otherwise) or voterpretation Contest, but did not participate.	who were entered in your sectio	nal Drama/Group

This financial report must be submitted to the IHSA Office within 10 days of the completion of your tournament.

Failure to submit the report within 60 days will result in the forfeiture of any refund or host guarantee.

Mail your report to IHSA, 2715 McGraw Drive, Bloomington, IL 61704, or fax it to 309-663-7479. If you have any questions, please contact Tammy Craig at 309-663-6377 or tcraig@ihsa.org.