

AEYA ENDOWMENT GAME FINAL REPORT

Please use this form to report gate receipts, other fund-raising revenues, itemized game-related expenses and the resulting proceeds for the Endowment. Send this form, along with a check made payable to AEYA to:

ALASKA ENDOWMENT FOR YOUTH ACTIVITIES, INC.

4048 Laurel Street, Suite 203 • Anchorage, AK 99508 • (907) 563-3723 • Fax 561-0720

Name of Host School

Town / City

Name of Visiting School

Town / City

Sport (check one)

Basketball Volleyball

Gender (check one)

Girls Boys Co-Ed

Level of play (check one)

Varsity JV Alumni

Date of Endowment Game

 / /200

Location of Endowment Game (Facility and Town)

ENDOWMENT GAME REVENUES

Please itemize revenues by gate receipts, special fund-raising, and any endowment donation forms.

NOTE: Schools hosting Endowment Games may choose to donate to the Endowment Fund either \$500 or 75% of the gross gate income, whichever is greater.

Total Gate Receipts

\$

Game Fund-raisers*

\$

Donations (attach forms)

\$

Total Revenues

\$

GAME EXPENSES

Please itemize expenses, briefly describing the cost item on the line provided next to the \$ amount box. Receipts for each expense should be stapled to this form.

Item: \$

Item: \$

Item: \$

Item: \$

Item: \$

Total Expenses

\$

GAME PROCEEDS

Proceeds for Endowment: Total Revenues less Total Expenses

\$

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Along with information about cash proceeds for the Endowment, it is important to track the time donated by volunteers whose work not only makes the game possible, but also more fruitful in terms of money going to the future of interscholastic sports and activities. Please track the officials, score keepers, ticket takers and other positions; note the number of hours they worked and if their time was donated. Volunteers will be recognized through a letter of thanks, recognition in the ASAA newsletter as "endowment supporters," and via other ways of recognition as these ways are developed.

Game Official's Name	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

Game Official's Name	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

Scorekeeper's Name	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

Timer's Name	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

Other Position	Name of Person Filling Position	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

Other Position	Name of Person Filling Position	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

Other Position	Name of Person Filling Position	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

Other Position	Name of Person Filling Position	Donate Time?	# Hours	Address to send Thank you letter
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input style="width: 40%;" type="text"/>	<input style="width: 95%;" type="text"/>

FOR OFFICE USE ONLY

Date Report Received	Date Proceeds Received	Comments
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Please return this 2-page report form with proceeds check to:
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