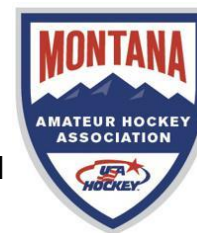


## MAHA STATE TOURNAMENT BUDGET REPORTING FORM



All host associations must complete and return to MAHA Tournament Director

Association Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

MAHA Tournament Hosted: \_\_\_\_\_ Date: \_\_\_\_\_

EXPENSES	Comments	TOTAL	INCOME	Comments	TOTAL
Referee Fees			Admissions		
Ice Fees			Team Fees		
Awards Fees			Shirt Sales		
Other (list below)			Program Sales		
			Raffle Sales		
			50/50 Sales		
			Other (list below)		
TOTAL EXPENSES			TOTAL INCOME		

INCOME: \_\_\_\_\_

-

EXPENSES: \_\_\_\_\_

=

PROFIT/LOSS \_\_\_\_\_

The purpose of this Budget Reporting form is to enable the MAHA Board to better understand the monetary needs of the host associations and base future decisions regarding MAHA State tournaments on information obtained. We appreciate the effort put forth by the host associations and hope to better serve your needs to enable all Montana Hockey youth players to participate in a memorable MAHA State Tournament.

### ATTACH BRACKET WITH TOURNAMENT SCHEDULE AND GAME SCORES

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EMAIL TO: Kate Leonberger      mslahockey@gmail.com