

Before Event

Event Name: _____

Event Date(s): _____

Total # of Tickets Printed: _____

Beginning Ticket #: _____

Ending Ticket #: _____

Value/Cost Per Ticket: \$ _____

Ticket Printer (name): _____ Date: _____

Ticket Verifier (name): _____ Date: _____

After Event

Total Number of Tickets Used: _____

Ticket #'s Used: _____

Ticket #'s Returned: _____

Used Ticket Disposition: _____

Unused Ticket Disposition: _____

(NOTE: all used and unused tickets must be retained per S & A guidelines)

Ticket User (name): _____ Date: _____

Ticket Verifier (name): _____ Date: _____

Attach this completed form to the Ticket Sales Deposit paperwork.**Before Event**

Event Name: _____

Event Date(s): _____

Total # of Tickets Printed: _____

Beginning Ticket #: _____

Ending Ticket #: _____

Value/Cost Per Ticket: \$ _____

Ticket Printer (name): _____ Date: _____

Ticket Verifier (name): _____ Date: _____

After Event

Total Number of Tickets Used: _____

Ticket #'s Used: _____

Ticket #'s Returned: _____

Used Ticket Disposition: _____

Unused Ticket Disposition: _____

(NOTE: all used and unused tickets must be retained per S & A guidelines)

Ticket User (name): _____ Date: _____

Ticket Verifier (name): _____ Date: _____

Attach this completed form to the Ticket Sales Deposit paperwork.