

**The Evergreen State College**  
**STUDENT ACTIVITIES BOX OFFICE STATEMENT**

NAME OF EVENT: \_\_\_\_\_ DATE: \_\_\_\_\_

LOCATION OF EVENT: \_\_\_\_\_ TIME: \_\_\_\_\_

ORGANIZATION NAME: \_\_\_\_\_

Ticket Outlet	Price	Quantity In	Comps.	Quantity Sold	Quantity Returned	Ticket Numbers	Ticket Color	Gross Sales

TOTAL EVENT GROSS.....\$ \_\_\_\_\_

COPROMOTER..... \$ \_\_\_\_\_

TOTAL GROSS NET.....\$ \_\_\_\_\_

\_\_\_\_\_  
SHOW PROMOTER NAME