

**HOME****SHEET DISTRIBUTION**

1 x The FA

1 x Retained

**STATEMENT OF RECEIPTS  
& PAYMENTS FORM****TheFA**PLEASE COMPLETE IN BLOCK LETTERS  
(Please write in ink)

COUNTY/LEAGUE:

**COMPETITION:**  
*delete as necessary*

THE FA COUNTY YOUTH CUP

THE FA NATIONAL LEAGUE SYSTEM CUP

Statement of Receipts and Expenditure of the Home Association/League .....

Match ..... v .....  
(Home Association/League) (Visiting Association/League)

Played at ..... On .....

Kick-off time ..... Attendance .....

Round .....

RECEIPTS	£	P	EXPENDITURE	£	P
Total Gross Gate Receipts			<i>Match Official's Expenses</i>		
Less:			Fees - Referees		
VAT (3/23rd)*			Assistant Referees		
Net Gate Receipts			Travel - Referees		
			Assistant Referees		
			Other - Referees		
			Assistant Referees		
			<i>Ground Expenses</i>		
			Use of - Ground (max £150) *		
			Floodlighting (max £50)		
			<i>Team Expenses</i>		
			Meals - After Match		
			(max £8.00 per head for 25 persons)		
			* only when a hiring charge is incurred		
			Other (please specify)		
Deficit Claimed From The Football Association					

\*These VAT adjustments are only necessary if your Club is registered for VAT.

Claim to be submitted by The Home Association/League direct to: The Football Association, Wembley Stadium, PO Box 1966, London SW1P 9EQ within SEVEN days of the match. Herewith statement of account together with supporting vouchers covering payments.

Signed ..... Official Position .....

Address .....

..... Date .....

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