



PROFESSIONAL CONTESTANTS PAYROLL SHEET

DATE OF EVENT: _____ LOCATION: _____

PROMOTER: _____

PAY for BOUT

NAME: _____ NAME: _____

PURSE _____ PURSE _____

TRAVEL _____ TRAVEL _____

MEALS _____ MEALS _____

OTHER: _____ OTHER: _____

TOTAL PURSE = \$ _____ TOTAL PURSE = \$ _____

DEDUCTIONS

TRAVEL _____ TRAVEL _____

MANAGER _____ MANAGER _____

MEDICALS _____ MEDICALS _____

OTHERS _____ OTHERS _____

TOTAL DEDUCTIONS \$ _____ TOTAL DEDUCTIONS \$ _____

NET PAY= \$ _____ NET PAY= \$ _____

SIGNATURE: _____ SIGNATURE: _____

Method Of Payment: _____
(Cash, check, cashiers check, etc)

This form must be filled out and signed by each professional contestant when they receive their pay. **It is the promoter's responsibility to get this form completed and returned.** The form may be given to the Inspector at the event or mailed to the Athletic Commission office, immediately after the event. Future promotional events may be affected if this form is not completed.