

<b>BPR-0009-453</b> Revised 11-07 (Format Only)	<b>FLORIDA STATE BOXING COMMISSION</b> 1940 North Monroe Street Tallahassee, Florida 32399-1016 (850) 488-8500 FAX (850) 922-2249 Email: <a href="mailto:Florida.Boxing@dbpr.state.fl.us">Florida.Boxing@dbpr.state.fl.us</a>	<b>POST-EVENT TAX REPORT FOR LIVE EVENT</b>
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This form, along with the 5% tax payment, must be filed (not postmarked) with the Florida State Boxing Commission by the promoter of a match or program of matches (event) or concessionaire no later than 72 hours after the conclusion of the event. Payments may be made by cash, check (payable to the Florida State Boxing Commission), money order or cashier's check, unless you have been otherwise notified by the Commission.

<b>NAME OF PROMOTER or CONCESSIONAIRE (as licensed)</b>	<b>DATE OF EVENT</b>
<b>NAME OF EVENT</b>	<b>NAME OF FACILITY WHERE EVENT WAS HELD</b>
<b>NAME OF TICKET PRINTING COMPANY</b>	<b>ADDRESS OF FACILITY</b>
<b>ADDRESS OF TICKET PRINTING COMPANY</b>	<b>TELEPHONE NUMBER OF FACILITY</b>

<b>I. BROADCAST, TELEVISION OR MOTION PICTURE RIGHTS</b> Gross amount paid for sale or lease of broadcasting, television or motion picture rights, less any state or federal taxes:	A.	
Calculation of tax payment:	X .05 (tax)	
The lesser of this amount or \$40,000 is the tax payment due for Item I:	----->	\$

<b>II. SOUVENIRS, PROGRAMS AND CONCESSIONS</b> Gross amount received by promoter or concessionaire from sale of souvenirs, programs & concessions, less any state or federal taxes:	B.	
Calculation of tax payment:	X .05 (tax)	
This is the tax payment due for Item II:	----->	\$

<b>III. TICKETS SOLD</b>		
Face value of ticket _____ X Number of tickets sold _____ = _____		
Face value of ticket _____ X Number of tickets sold _____ = _____		
Face value of ticket _____ X Number of tickets sold _____ = _____		
Face value of ticket _____ X Number of tickets sold _____ = _____		
Face value of ticket _____ X Number of tickets sold _____ = _____		
Face value of ticket _____ X Number of tickets sold _____ = _____		

Gross amount received for tickets sold, less any state or federal taxes:	C.	
Calculation of tax payment:	X .05 (tax)	
This is the tax payment due for Item III:	----->	\$

<b>IV. COMPLIMENTARY TICKETS ISSUED</b>		
Face value of ticket _____ X Number tickets issued _____ = _____		
Face value of ticket _____ X Number tickets issued _____ = _____		
Face value of ticket _____ X Number tickets issued _____ = _____		

Gross face value of complimentary tickets issued - (cannot be zero):	D.	
Calculation of tax payment:	X .05 (tax)	
This is the tax payment due for Item IV:	----->	\$

<b>TOTAL AMOUNT OF TAX DUE FOR ITEMS I, II, III AND IV</b>	----->	<b>\$</b>
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I certify that the information contained on this form, to the best of my knowledge and belief, is an accurate reflection of the tax payment due the Florida State Boxing Commission. I understand that if the Commission determines that this report is not an accurate reflection of the monies due the Commission, I may be fined, my promoter or concessionaire license may be suspended or revoked, I may be prosecuted for a second degree misdemeanor, or all of the above.

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Signature of Licensee