



**Professional Boxing, Wrestling and Martial Arts
 PROMOTER PAYOUT REPORT**
 Page ____ of ____

1. Date of Event _____
2. Times of the Event – Start Time: _____ Bell Time: _____
3. Location of Event - City/County _____
4. Event's Virginia License Number

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5. Type of Event Boxing Wrestling

Approval	Participant's Name	VA License Number	Stage Name	Amount Contracted to Pay	Participant Initials

Total Paid or Contracted to Pay for Page 1	
Total Paid or Contracted to Pay for Page 2	
Total Paid or Contracted to Pay for Page 3	
Grand Total	
Total Number of Participants	

I certify all information and computations are correct. _____ (Initial)