



LEVEL / GAME TYPE
 Intermediate
 Beginner
 Tournament
 Reg. Season
 Playoff Gm.
 City:

Send Completed Sheet To:
 Hockey North America/DSSI
 P.O. Box 78
 Sterling, VA USA 20167
 Tel: (703) 430-8100
 Toll Free Fax: (888) HNA-SKOR

AFTER THE GAME - READ CAREFULLY

This sheet must be completely filled out (attending rosters, shots on goal, scorers & penalties) and returned to the LEAGUE OFFICE WITHIN 72 HOURS OF GAME DATE to receive full credit. After 72 hours, 1/2 credit. If submitted after the season, 1/4 credit. Fax the completed sheet to HNA's toll free fax line (888) HNA-SKOR. Double check your work that the teams / scorers & jersey numbers all match up correctly. Scorekeeper: Mark your name clearly to ensure proper credit.

Team Name	1	2	3	OT	Final
Snappers	-	-	1	-	1
Thunder Chickens	1	2	2	-	5

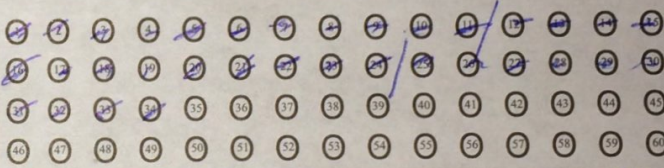
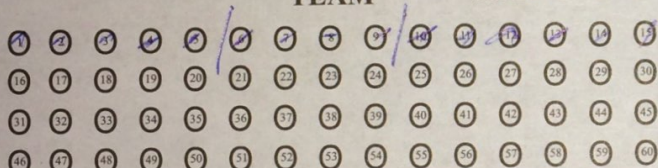
Date: January 4, 2019
 Arena: Vivo East
 Time: 1030 AM / PM
 Game Supervisor: Les

TEAM

- TEAM Snappers**
- 1 (G) Lo. Anne Foster
 - 13 Charity Three Stars
 - 48 Amanda Buchanan
 - 27 Kristin Laughlin
 - 2 Kelly Epp
 - 96 Cindy Christie-Brooks
 - 21 Anna McFarlan
 - 9 Bryana Kuntz
 - 10 Angu Moorj

- THUNDER CHICKENS**
- 2 Christine Le
 - 3 Vanessa Wong
 - 4 Alexia Mereau
 - 5 Krista Morris
 - 6 Gyann Yiu
 - 7 Debbie Sung
 - 8 Paige Simard
 - 9 Susan Cowitz
 - 10 Haley Henschel
 - 11 Leah Ellis
 - 12 Jen Kimbauer
 - 14 Aslaug Woolstad
 - 15 Mylene Moen
 - 16 Sam Brown
 - 17 Keri-Dawn Hill
 - 18 Brenda Ferguson
 - 19 Lorianne Dobek
 - 27 Lesley Hylands
 - 31 Taylor Bourhis

SHOTS ON GOAL



Shot Totals Per. 1: 5 Per. 2: 4 Per. 3: 6 Total: 15

Shot Totals Per. 1: 11 Per. 2: 13 Per. 3: 10 Total: 34

TEAM SCORING					TEAM					PLAYER NO.		PENALTIES			
PER	PP/SH	TIME	GOAL	ASSIST	PER	PP/SH	TIME	GOAL	ASSIST	PERIOD	MIN.	OFFENSE	START	EXPIRED	G/G
3	-	9:08	27	48	1	-	9:26	7	9	2	27	Tri. P.	10:40	8:40	NG
					2	-	5:14	7	3	2	5	Int.	4:22	2:22	NG
					2	-	0:22	4	7	2	48	Hook	3:58	1:58	NG
					3	-	12:34	7	17	3	13	Int.	11:48	11:43	G
					3	PP	11:43	5	-						

Comments:

Officials
 1. _____ Print: Corey
 2. _____ Print: Mike
 Top Copy: League Office 2nd Copy: Local Administration 3rd Copy: Home Captain 4th Copy: Away Captain 5th Copy: Game Supervisor

DATE RETURNED: _____
 VALUE: \$ _____
 CODE: F/OT R SOG LT AS