



# OFFICIAL SCORESHEET

Send Completed Sheet To: **Level of Play/Game Type**  
 Hockey North America/AIHF  Intermediate  
 45570 Shepard Drive #3  Beginner  
 Sterling, VA USA 20164  Tournament  
 Tel: (703) 430-8100  Reg Season  
 Fax: (888) HNA-SKOR  Playoff Gm

**AFTER THE GAME:** Please be sure to note City, Teams, and Final Score and return the completed game sheet the following morning. Fax the completed scoresheet to HNA's fax line (scoresheets only). Fax (888) HNA-SKOR or by Email: aihf@earthlink.net. Take a picture of the game sheet with your phone & email it! Completed sheet must be returned to the League Office receive credit. Scorekeeper: Mark your name clearly to ensure proper credit.

**Make Sure The Teams & Score are Correct**

Team Name	1	2	3	OT	Final	Date: <u>12 5 23</u>
AWAY Misfits						Arena: <u>WRST</u>
HOME Piranhas						Time: <u>1020 AM / PM</u>
						Game Supervisor: <u>Dan Roney</u>

HOME TEAM				AWAY TEAM			
#	Name	#	Name	#	Name	#	Name
31 (G)	Peifer	29	Santelli		(G)		
0	Finger	11	Feilen				
0-5	Sabatino						
4	Raehl						
2	Birgenen						
16	Hornrich						
42	Clark						
30	Finger						
83	Santelli						
13	Newell						

HOME TEAM															SHOTS ON GOAL															AWAY TEAM														
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)
(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)	(30)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)	(30)	(31)	(32)	(33)	(34)	(35)	(36)	(37)	(38)	(39)	(40)	(41)	(42)	(43)	(44)	(45)
(46)	(47)	(48)	(49)	(50)	(51)	(52)	(53)	(54)	(55)	(56)	(57)	(58)	(59)	(60)	(46)	(47)	(48)	(49)	(50)	(51)	(52)	(53)	(54)	(55)	(56)	(57)	(58)	(59)	(60)	(46)	(47)	(48)	(49)	(50)	(51)	(52)	(53)	(54)	(55)	(56)	(57)	(58)	(59)	(60)

Shot Totals Per. 1: \_\_\_\_\_ Per. 2: \_\_\_\_\_ Per. 3: \_\_\_\_\_ Total: \_\_\_\_\_

Shot Totals Per. 1: \_\_\_\_\_ Per. 2: \_\_\_\_\_ Per. 3: \_\_\_\_\_ Total: \_\_\_\_\_

HOME TEAM					SCORING					AWAY TEAM					PLAYER NO.				PENALTIES			
PER	PP/SH	TIME	GOAL	ASSIST	ASSIST	PER	PP/SH	TIME	GOAL	ASSIST	ASSIST	PERIOD	HOME	AWAY	MIN.	OFFENSE	START	EXPIRED	G/GG			

Comments: Misfits did not field a Team.

**Officials**  
 1. \_\_\_\_\_ Print: \_\_\_\_\_ 2. \_\_\_\_\_ Print: \_\_\_\_\_ 3. \_\_\_\_\_ Print: \_\_\_\_\_  
 Top Copy: League Office   2nd Copy: Local Administration   3rd Copy: Home Captain   4th Copy: Away Captain   5th Copy: Game Supervisor

Revised 08/2317

