2.2)	
OFFICIAL SCORESHEET	AFTER THE GAME: Please be sure to note City, Teams, and Final Score and return the completed game sheet the following morning.
Send Completed Sheet To: Level of Play/Game Type Hockey North America/AIHF Intermediate	Fax the completed scoresheet to HNA's fax line (scoresheets only). Fax (888) HNA-SKOR or by Email: aihf@earthlink.net.
45570 Shepard Drive #3 [] Beginner Sterling, VA USA 20164 [] Tournament	Take a picture of the game sheet with your phone & email it! Completed sheet must be returned to the League Office receive credit.
Tel: (703) 430-8100 Reg Season Fax: (888) HNA-SKOR Playoff Gm	Scorekeeper: Mark your name clearly to ensure proper credit. Make Sure The Teams & Score are Correct
Team Name 1 2 3	OT Final Date: Nov 29, 2021
A	Arena: ICE ZONE
SPITFILES 2 0	Time: 8:30 AM PM Game Supervisor:
M STARS 023	- S RERRY SAFFER
# Name # Name	# Name # Name
X(G) K. HIGGINS 8 J. Pangas	30(G) A. BROWS, 18 B. LOUGHMAN
13 P. BROEKER 26 B. ROZEN 83 F. DONALDSON 65 T. STEINHART	II T. CLAUDIN 10 J. ANDERSON
9 S. COLLACHER 97 R. TIEFENBRUCK	14 M. DOHLE ZI R. BARRETT
60 P. GRELLE 95 J. TONNIES 19 K. JENNEWEIN 91 R. WHITMORE	8 A. PLENDORFF 9 G. RIEGER
36 4. LA SOAY	94 M. HAUEISEN 12 M. BARRETT
55 P. LANG 11 D. McCoy	96 M. HARRIS
44 J. 9,68501	3 J. OTT
HOME TEAM SHOTS ON	GOAL AWAY TEAM
Shot Totals Per. 1: Per. 2: Per. 3: Total: 3 Sho	ot Totals Per. 1: 10 Per. 2: 9 Per. 3: 1 Total: 30
HOME TEAM SCORING AWAY TEAM	PLAYER NO. PENALTIES
PER PP/SH TIME GOAL ASSIST ASSIST PER PP/SH TIME GOAL ASSIST ASSIST QUELLE PP/SH TIME GOAL ASSIST ASSIST ASSIST ASSIST QUELLE PP/SH TIME GOAL ASSIST ASS	PERIOD HOME AWAY MIN. OFFENSE START EXPIRED G/NG 1 10 2 TRUP 1208 1008 -
2 - 330 9 95 91 1 - 320 3 96 21	3 11 2 ROUGH 1241 1041 -
2 - 1341 95 91 9 1 - 1329 94 9 - 2 - 330 9 95 91 1 - 320 3 96 21 3 PR 730 9 60 91 2 - 559 8 21 - 3 - 513 19 97 -	3 44 2 SLASH 128 1018 -
3 - 348 60	3 11 2 HOOK 921 730 G
	3 60 10 MISCONDUCT 009
	3 3 10 4 009
Comments: 70 - A 5:13(3)	
Officials 1. Print: 2	Vic Motora Zer 3. Print:
Top Copy: League Office 2nd Copy: Local Administration 3rd Copy: Home Capta.	Revised