



# 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 Fin  
 Score and return the completed game sheet the following mornin  
 Fax the completed scoresheet to HNA's fax line (scoresheets onl  
 Fax (888) HNA-SKOR or by Email: aihf@earthlink.n  
 Take a picture of the game sheet with your phone & email it! Co  
 pleted sheet must be returned to the League Office receive cred  
 Scorekeeper: Mark your name clearly to ensure proper credit

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

Team Name		1	2	3	OT	Final
A W A Y	Hawks	-	1	-	-	1
H O M E	Bushwood	1	2	1	-	2

Date: 2/28/24  
 Arena: CJ  
 Time: 10:15 AM / PM  
 Game Supervisor: J. Anderson

### HOME TEAM

### AWAY TEAM

#	Name	#	Name	#	Name
(G)	Bogucky	12	Green	34 (G)	Siner
33	McCormick	23	Friedman	4	Galler
44	Johnson	24	Allen	11	White
11	Scarpelli	34	FABERS	14	HOSMER
16	Blake	<del>22</del>	<del>Mansforth</del>	22	LEE
4	Pham	14	Larson	24	Sirjani
10	McCormick	55	Lewton	90	Lieb
32	Leib	7	Sullivan	91	Button
40	Louaeus	21	Kramer	27	Andren
94	Henneberger				

## SHOTS ON GOAL

HOME TEAM																														AWAY TEAM																													
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	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
31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	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																														

Shot Totals Per. 1: 6 Per. 2: 9 Per. 3: 6 Total: 21     Shot Totals Per. 1: 7 Per. 2: 5 Per. 3: 5 Total: 17

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
1	-	3:50	10	94	-	2	-	10:03	11			3	10		2	A stick	9:29	7:29
2	-	14:15	32	21	-							3		91	2	TRIP	6:31	4:31
2	-	6:58	40	32	23							3	-	4	2	TRIP	2:36	2:36
3	-	10:30	40	34	27							3	34	-	2	Rough	2:9	
												3	24	-	2		2:9	
												3	-	91	2	Rough	2:9	

Comments: TO BIK

Officials: [Signature] 1. [Signature] 2. Katon Print: \_\_\_\_\_ 3. \_\_\_\_\_ Print: \_\_\_\_\_

Top Copy: League Office    2nd Copy: Local Administration    3rd Copy: Home Captain    4th Copy: Away Captain    5th Copy: Game Supervisor