Top Copy: League Office

## OFFICIAL SCORESHEET

Send Completed Sheet To: Level of Play/Game Type Hockey North America/AIHF P.O. Box 78 Sterling, VA USA 20167 Tel: (703) 430-8100

[ ] Intermediate Beginner

[ ] Tournament [ ] Reg Season

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. This sheet must be returned to the league office to receive credit to your player account.

Scorekeeper: Mark your name clearly to ensure proper credit.

Print:

5th Copy: Game Supervisor

Fax: (888) HNA-SKOR	[ ] Playoff Gm	Make Sure The Teams & Score are Correct
Team Name  CHIEFS	1 2 3 3 1 2	OT Final Date:  -  -22   Arena:  CE ZONE   Time:  0: 0 AM / M
CHIEFS  H STEALTH	001	Game Supervisor:    STEPHEN SPIROS
HOME TEAM  # Name  (G) It ATFIELD  25 MCAFBE  16 AARANSON  20 VITALE  12 COLE  11 FLALEY  12 SHECHAN  23 CASSEL  10 COMPTON  HOME TEAM  NO D D D D D D  D D D D D  D D D D  D D D D  D D D D  D D D D  D D D D  D D D  D D D  D D D  D	SHOTS ON	AWAY TEAM    Name
Shot Totals Per. 1: S Per. 2: T Per. 3:  HOME TEAM SCORING  PER PPISH TIME GOAL ASSIST ASSIST PER PPIS  3 illei 23 2 1  1 2  3 3  3 3  3 3  3 3  4 3  5 0  6 0  6 0  7 0  7 0  7 0  7 0  7 0  8 0  8 0  8	AWAY TEAM	Totals Per. 1:
Officials		

4th Copy: Away Captain

3rd Copy: Home Captain

Print: HARDY WOODARD / CHARLE WEBBY W.D

2nd Copy: Local Administration