OFFICIAL SCORESHEET

Send Completed Sheet To:
Hockey North America/AIHF
45570 Shepard Drive #3
Sterling, VA USA 20164
Tel: (703) 430-8100
Fax: (888) HNA-SKOR

Level of Play/Game Type
[ ] Intermediate
[ ] Beginner
[ ] Tournament
[x] Reg Season
[ ] 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
AWAY	Shock	2	2	1	/	5
HOME	Thrashers	0	0	1	/	1

Date: 10/20
Arena: DISC A
Time: 3:20 AM / PM
Game Supervisor: Stern

HOME TEAM

Winter 2023 - 2024 – Detroit Thrashers

32 Sage (G)
10 Morris (C)
11 Chahal
14 Pagel
20 Schuetz
~~24 Hurley~~
28 Godinez
~~33 Grimes~~
38 Bernaiche
40 Serdoner
45 Carpenter (A)
46 Kozar
~~52 Clevenger (A)~~
61 Marut
~~63 Kohlstrand~~
67 Sutka

AWAY TEAM

#	Name	#	Name
35 (G)	Burmeister		
1	Lisi	20	Mosley
5	Nickel	24	Anderson
9	Reynolds	8	Novicki
10	Hunter	22	Fontaine
21	Brejcha		
26	Ritz		
27	A. Tomei		
33	P. Tomei		
42	Jenkins		

SHOTS ON GOAL

HOME 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
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

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

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
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

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

SCORING

HOME TEAM PER	PP/SH	TIME	GOAL	ASSIST	ASSIST	AWAY TEAM PER	PP/SH	TIME	GOAL	ASSIST	ASSIST
3	/	:34	45	14	10	1	/	3:23	5	9	91
						1	/	:13	1	5	72
						2	/	2:36	90	1	/
						2	/	:05	86	28	42
						3	/	4:14	1	90	72

PENALTIES

PERIOD	PLAYER NO. HOME	PLAYER NO. AWAY	MIN.	OFFENSE	START	EXPIRED	G/NG

Comments:

Officials
1. _____ Print: _____ 2. _____ Print: M. HANDFORD 3. _____ Print: _____

Top Copy: League Office *2nd Copy: Local Administration* *3rd Copy: Home Captain* *4th Copy: Away Captain* *5th Copy: Game Supervisor* Revised 2013

LOCAL ADMINISTRATION