

LEAGUE: _____

LOCATION: _____

DATE: _____



EVENT OR WEEK# _____

OF PLAYERS: _____

(Please PRINT)

- 1st _____
- 2nd _____
- 3rd _____
- 4th _____
- 5th _____
- 6th _____
- 7th _____
- 8th _____
- 9th _____
- 10th _____
- 11th _____
- 12th _____
- 13th _____
- 14th _____
- 15th _____
- 16th _____
- 17th _____

- 18th _____
- 19th _____
- 20th _____
- 21st _____
- 22nd _____
- 23rd _____
- 24th _____
- 25th _____
- 26th _____
- 27th _____
- 28th _____
- 29th _____
- 30th _____
- 31st _____
- 32nd _____
- 33rd _____

Please post results to web site within 48 hours.

Please fax to 701-293-9408 for league files. Include check-in list of players (or seating grid).

Notes: _____
