AMERICAN BRIDGE ASSOCIATION, INC.

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CITY POINT REPORT FORM

CLUB/UNIT	
CITY/STATE	
NO. GAMES	

PLAYER ID	PLAYER' NAME	TOTAL POINTS

Number of points awarded for a four (4) month period. From: _____ to _____.
Secretary/Point Coordinator _____ Date _____

UNITS MUST SUBMIT A CONSOLIDATED REPORT FOR ALL AFFILIATED CLUBS