

National Postal Rifle Match

Service / Open (Circle one)

Name: _____ Detachment/Dept: _____

(In this order – X, 10, 9, 8, 7, 6, 5, M)

1st Round	1	2	3	4	5	6	7	8	9	10	Total	X
Offhand												
Sitting												
Prone												
											TOTAL	
2nd Round	1	2	3	4	5	6	7	8	9	10	Total	X
Offhand												
Sitting												
Prone												
											TOTAL	

Combined Total: _____

Date Fired: _____

Shooter's Signature: _____

Scorer's Initials: _____

Team Captain Signature: _____