

TOURNAMENT REPORT FORM

IT3

Federation GRE		Name of Tournament 45th Greek Team Ch. 2017							
Country and Place of Tournament Porto Rio Hortel					Starting date 2017/07/03		Ending date 2017/07/08		
Organizer of the Tournament Greek Chess Federation, ESSP									
Contact Information (Address, phone, fax, E-mail) of the person responsible for information: _____ _____ _____									
Number of Rounds 7		Schedule (number of rounds/day)				Rate(s) of play 90'/40m + 30'/end & 30"/m			
Tournament Type Team Swiss System			Pairing System of a Swiss System Tournaments FIDE Manual <input type="radio"/> Person responsible Computerized <input checked="" type="checkbox"/> Program used Swiss-Manager						
Special Remarks (exception in pairing, restart option,) _____ _____ _____									
Type	Number	Number of Feds	Host Fed. players	Other Fed players	Type	Number	Number of Feds	Host Fed. players	Other Fed players
Rated	567	20	512	55	Unrated	66	1	66	0
GM	31	14	10	21	WGM	7	3	4	3
IM	24	9	10	14	WIM	2	2	1	1
FM	32	6	26	6	WFM	5	3	2	3
Chief Arbiter and contact information for Chief Arbiter (Address, phone, fax, E-mail): IA Andrikopoulou Efstathia (4215370) <u>andreffie@yahoo.gr</u>									
1 st Deputy Chief Arbiter		FA Spiliopoulos4214412							
If more than 50 players		2 nd Deputy Chief Arbiter IA Keramiotis4285310							
If more than 100 players		3 rd Deputy Chief Arbiter FA Bousios4201590							
If more than 150 players		4 th Deputy Chief Arbiter NA Pahaki 4238621							

The organizer must provide this report form to each arbiter who has achieved a norm, his/her federation, the organizing federation and the FIDE Secretariat