Rating:
TOURNAMENT REPORT FORM

IT3

Federation **LBN**	Name of Tournament **LBN Final 2018**		
Country and Place of Tournament **AUL- Cola**		Starting date **2019/01/17**	Ending date **2019/01/29**
Organizer of the Tournament **Lebanese Federation**			

Contact Information (Address, phone, fax, E-mail) of the person responsible for information:

Number of Rounds **11**	Schedule (number of rounds/day)	Rate(s) of play **90 mins for 40 moves + 30 mins + 30 sec inc from move 1**
Tournament Type **Individual Round Robin**	Pairing System of a Swiss System Tournaments **FIDE** Manual O Person responsible Computerized **X** 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	12	1	12	0	Unrated	0	0	0	0
GM	0	0	0	0	WGM	0	0	0	0
IM	0	0	0	0	WIM	0	0	0	0
FM	4	1	4	0	WFM	0	0	0	0

Chief Arbiter and contact information for Chief Arbiter (Address, phone, fax, E-mail):

FA Jamal Shamieh (5300444)

Deputy Chief Arbiter	**NA Hassan Jouni (5302609)**
Arbiter	
Arbiter	
Arbiter	

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