

TOURNAMENT REPORT FORM

IT3

Federation SUD		Name of Tournament Sudan Final Championship							
Country and Place of Tournament					Starting date 2019/03/15		Ending date 2019/03/25		
Organizer of the Tournament Sudan Chess 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 min, 30sec per move				
Tournament Type 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	48	1	48	0	Unrated	24	1	24	0
GM	0	0	0	0	WGM	0	0	0	0
IM	0	0	0	0	WIM	0	0	0	0
FM	3	1	3	0	WFM	0	0	0	0
Chief Arbiter and contact information for Chief Arbiter (Address, phone, fax, E-mail): Omer Musa 12200298 _____ _____									
Deputy Chief Arbiter		Mohamed Awad 012203130							
Arbiter		Mohamed Hassan 012203149, Bashir Omer 12200425							
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