









<div></div> <div></div>					
EVENT					DATE
ROUND		BOARD		SECTION	OPENING
WHITE (Name)			BLACK (Name)		
	WHITE	BLACK		WHITE	BLACK
1			21		
2			22		
3			23		
4			24		
5			25		
6			26		
7			27		
8			28		
9			29		
10			30		
11			31		
12			32		
13			33		
14			34		
15			35		
16			36		
17			37		
18			38		
19			39		
20			40		
RESULT: <input type="checkbox"/> WHITE WON <input type="checkbox"/> DRAW <input type="checkbox"/> BLACK WON					
SIGNATURE			SIGNATURE		
<div></div> <div></div>					

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