

## RTS OFFICE SCORE NOTIFICATION FORM

CN

1001							
EVENT:			DATE:				
RELAY:			ELIMINATION / QUALIFICATION:				
PRELIMINARY POSTED BY (N						TIME:	
PROTEST TIM					TIME:		
THERE WERE NO PRO- TESTS (NAME):						RESULTS CONFIRMED:	
OR						I	
PROTEST SUE	ORM)	TIME I			PROTEST IVED:		
RESULTS NOT	YET CONFIRM	IED					
SIGNATURE OF RTS OFFICER:						TIME:	
SIGNATURE OF RTS JURY MEMBER:						TIME:	
SIGNATURE OF RANKING TECHNI- CAL OFFICER:						REF:	

NOTE: When completed by the RTS Officer, a copy of this form must be sent to the Range (EST) Control Room immediately.