

MIXED MARTIAL ARTS BOUT RESULTS

**not for use with other combat sports
(boxing, kickboxing, grappling, etc)*

** Information circled in red is required*

California State Athletic Commission			
2005 Evergreen Street		Sacramento	CA 95815
P: 916	263	2195	F: 916 263 2197 Andy.Foster@dca.ca.gov
EXECUTIVE DIRECTOR: Andy Foster			
SUPPORTING OFFICIALS:			
NAME:			TITLE:
NAME:			TITLE:
NAME:			TITLE:
NAME:			TITLE:
NAME:			TITLE:
NAME:			TITLE:

CITY :	Lancaster	DATE:	11/14/2015
STATE/PROVINCE :	CA	VENUE :	Pioneer Event Center
EVENT NAME :			
PROMOTER :	Samuel Roman		
JUDGE(s):	1. Abe Belardo	2. Ralph McKnight	3. Mike Bray
	4.	5.	6.
REFEREE(s):	1. Mike Bell	2.	3.
	4.	5.	
RINGSIDE DOCTOR(s):	1. Diego Allende	2. Paul Wallace	3.
ANNOUNCER:			
TIMEKEEPER:	Mike North		
MATCHMAKER:	Hervi Estrada		

BOUT #	RDS.	STATUS	FIGHTER NAME	MMA ID# ^{and/or} DOB	WEIGHT	WINNER	RD.	TIME	METHOD	SUSPENSIONS
1	3	<input checked="" type="radio"/> Pro	Ricardo Del Riego	138-095 MM DD YYYY	154	<input checked="" type="radio"/>	3	5:00	Slit Decision Judge# 1 Score 29 - 28 Judge# 2 Score 29 - 28 Judge# 3 Score 28 - 29 Referee # 1	Del Riego- 60/60 cut to L-eye
		<input type="radio"/> Am	Taif Harris	146-034 MM DD YYYY	156.5	<input type="radio"/>				
2	3	<input checked="" type="radio"/> Pro	Joshua Williams	120-706 MM DD YYYY	164	<input type="radio"/>	1	4:54	TKO ref stopped fight due to strikes Judge# 1 Score - - Judge# 2 Score - - Judge# 3 Score - - Referee # 1	Williams- 45/30
		<input type="radio"/> Am	Tramaine Lewis	132-906 MM DD YYYY	165.5	<input checked="" type="radio"/>				
3	3	<input checked="" type="radio"/> Pro	Jordan Harris	137-834 MM DD YYYY	125.25	<input checked="" type="radio"/>	3	3:00	Unanimous Decision Judge# 1 Score 29 - 28 Judge# 2 Score 29 - 28 Judge# 3 Score 30 - 27 Referee # 1	
		<input type="radio"/> Am	Levon Sargsyan	125.75 MM DD YYYY		<input type="radio"/>				
4	3	<input checked="" type="radio"/> Pro				<input type="radio"/>				
		<input type="radio"/> Am				<input checked="" type="radio"/>				

BOUT #	RDS.	STATUS	FIGHTER NAME	MMA ID# ^{and/or} DOB	WEIGHT	WINNER	RD.	TIME	METHOD	SUSPENSIONS
5	3	<input checked="" type="radio"/> Pro <input type="radio"/> Am	<input type="text"/> <input type="text"/>	<input type="text"/> MM DD YYYY	<input type="text"/> <input type="text"/>	<input checked="" type="radio"/> <input type="radio"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> Judge# Score - Judge# Score - Judge# Score - Referee # 1	
6	3	<input checked="" type="radio"/> Pro <input type="radio"/> Am	<input type="text"/> <input type="text"/>	<input type="text"/> MM DD YYYY	<input type="text"/> <input type="text"/>	<input checked="" type="radio"/> <input type="radio"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> Judge# Score - Judge# Score - Judge# Score - Referee # 2	
7	3	<input checked="" type="radio"/> Pro <input type="radio"/> Am	<input type="text"/> <input type="text"/>	<input type="text"/> MM DD YYYY	<input type="text"/> <input type="text"/>	<input checked="" type="radio"/> <input type="radio"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> Judge# Score - Judge# Score - Judge# Score - Referee # 3	
8	3	<input checked="" type="radio"/> Pro <input type="radio"/> Am	<input type="text"/> <input type="text"/>	<input type="text"/> MM DD YYYY	<input type="text"/> <input type="text"/>	<input checked="" type="radio"/> <input type="radio"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> Judge# 1 Score - Judge# 2 Score - Judge# 3 Score - Referee # 1	
9	5	<input checked="" type="radio"/> Pro <input type="radio"/> Am	<input type="text"/> <input type="text"/>	<input type="text"/> MM DD YYYY	<input type="text"/> <input type="text"/>	<input type="radio"/> <input checked="" type="radio"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> Judge# Score - Judge# Score - Judge# Score - Referee # 2	
10	3	<input checked="" type="radio"/> Pro <input type="radio"/> Am	<input type="text"/> <input type="text"/>	<input type="text"/> MM DD YYYY	<input type="text"/> <input type="text"/>	<input checked="" type="radio"/> <input type="radio"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> Judge# Score - Judge# Score - Judge# Score - Referee # 2	
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