

Sheet1

<b>Your number</b>	<b>Primary Reviewer on</b>	<b>Secondary Reviewer on</b>
1	2, 4	6, 8
2	1, 3	5, 7
3	6, 8	10, 12
4	5, 7	9, 11
5	10, 12	14, 16
6	9, 11	13, 15
7	14, 16	18, 20
8	13, 15	17, 19
9	18, 20	2, 4
10	17, 19	1, 3
11	2, 4	6, 8
12	1, 3	5, 7
13	6, 8	10, 12
14	5, 7	9, 11
15	10, 12	14, 16
16	9, 11	13, 15
17	14, 16	18, 20
18	13, 15	17, 19
19	18, 20	2, 4
20	17, 19	1, 3