

Name

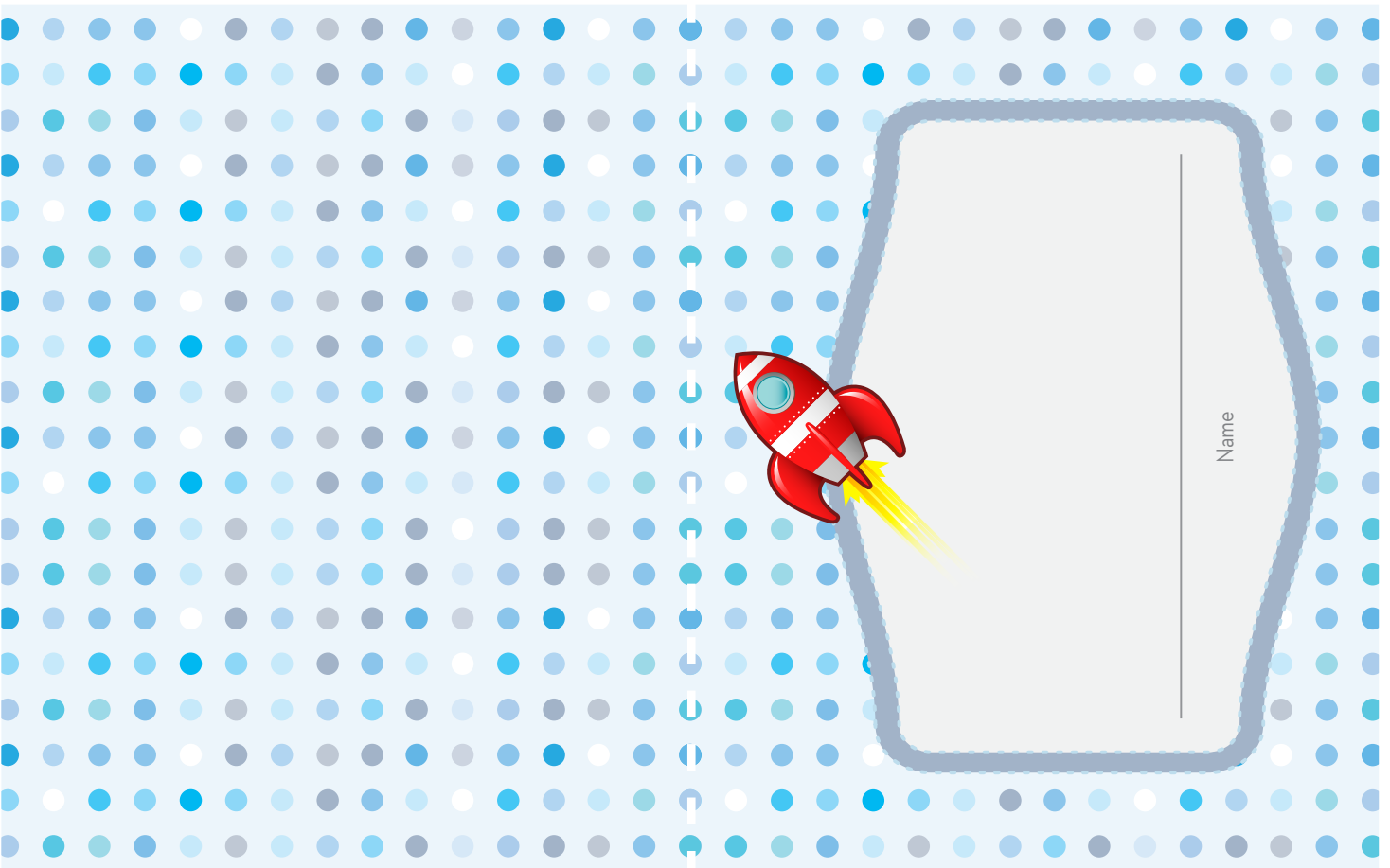
Street Address

City / State

Phone Number

Secondary Phone Number

Fold



Name