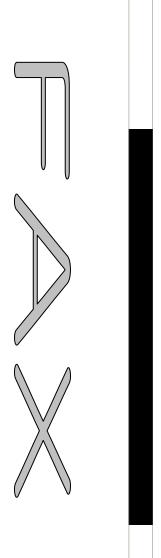
Company Name:

Phone:

FAX:

Address:



TO: FROM:

FAX #: FAX #:

DATE: # OF PAGES:

MESSAGE: