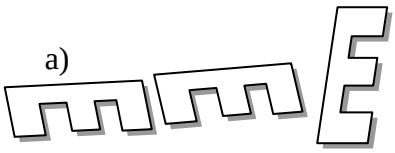
Name: Date:
Subname:

-1

a) 

b)

c)