Location: _____

NAME: _____
LAST FIRST MIDDLE

I Authorize The Charging Of My Account: _____

(ORDER MUST BE SIGNED)

MARKING INSTRUCTIONS

- Use No. 2 pencil or blue or black ink pen only.
- Do not use red ink or felt tip pens.
- Make solid marks that fill the oval completely.
- Make no stray marks on this form.
- Do not fold, tear, or mutilate this form.

WRONG MARKS ✓ ✗ • RIGHT MARK ●

1 ITEM AMT

2 ITEM AMT

3 ITEM AMT

4 ITEM AMT

5 ITEM AMT

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