

ARTIST : _____

ENGR : _____

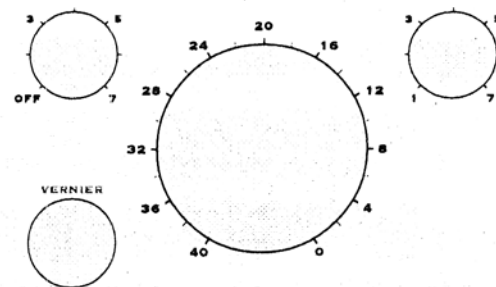
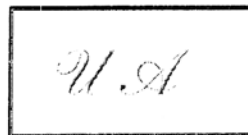
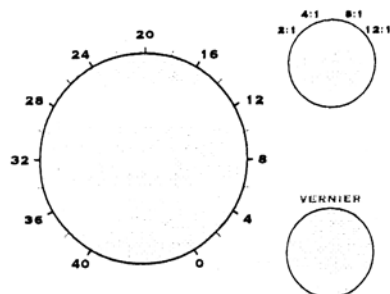
DATE : _____

TITLE : _____

ASST : _____

STUDIO : _____

INSTR / MIC: _____



SERIAL #: _____