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Licence #D-0378

DATE: / /
 D M Y

DOCTOR: _____

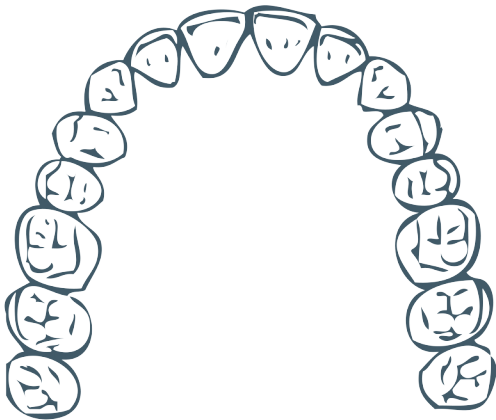
PATIENT: _____

ESSAI ☐

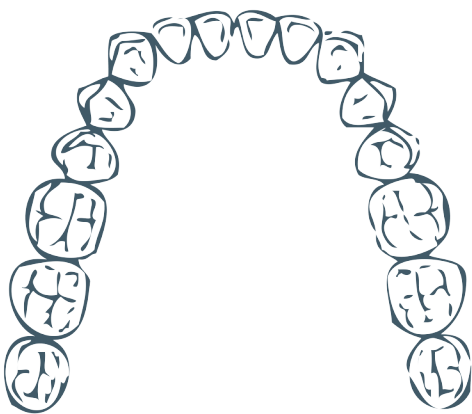
FINISH ☐

BACK ON: _____

11 | 21

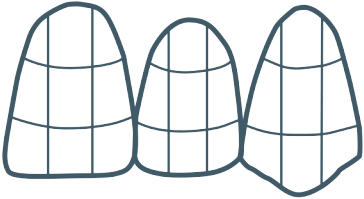


31 | 41



INSTRUCTIONS:

COLOUR: _____



SIGNATURE

LICENCE #