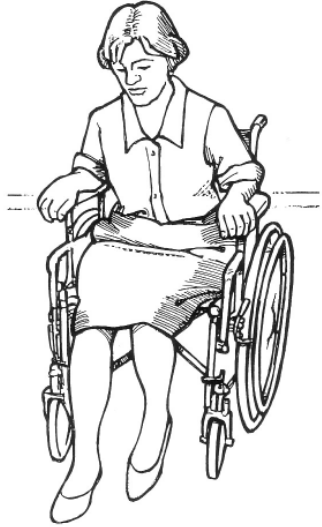


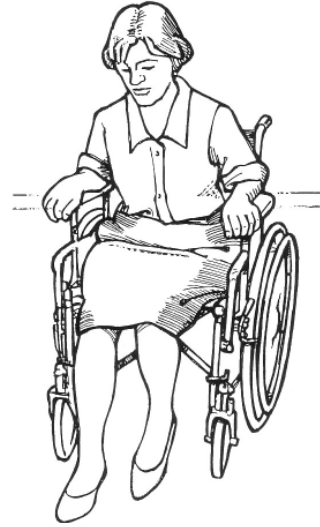
INDEPENDENT W/C FEET



Assessment Date: _____

M-IWCF

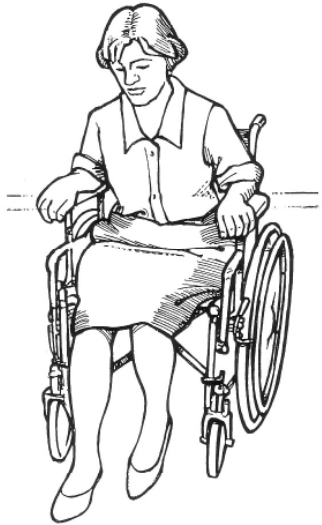
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Assessment Date: _____

M-IWCF

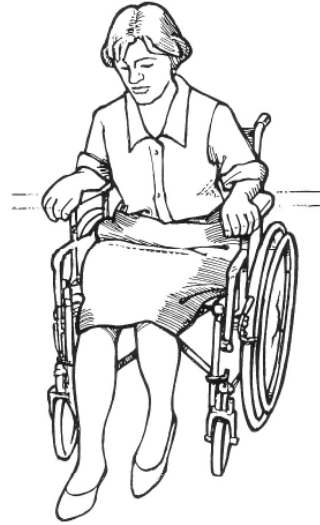
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Assessment Date: _____

M-IWCF

INDEPENDENT W/C FEET



Assessment Date: _____

M-IWCF