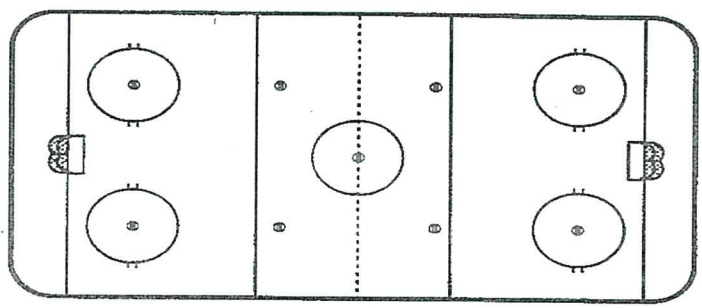




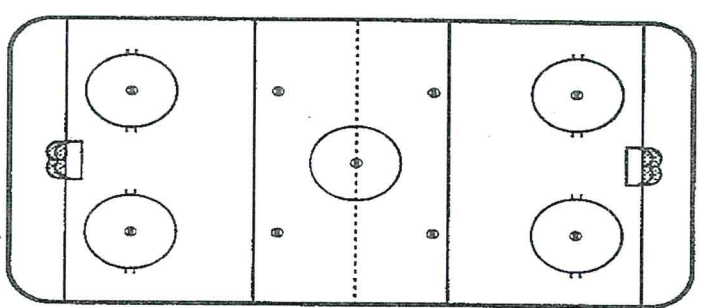
DATE:	LOCATION:	TIME:	PRACTICE No.:
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Line-up:

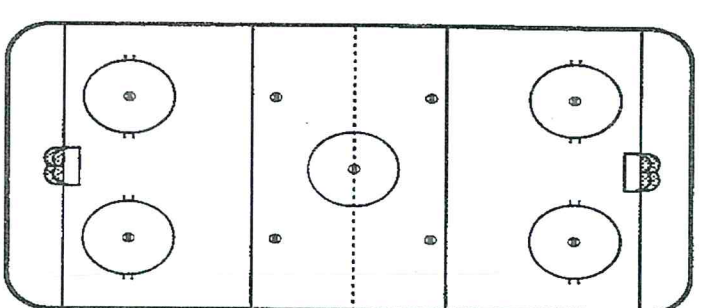
TIME	DESCRIPTION	KEY POINTS



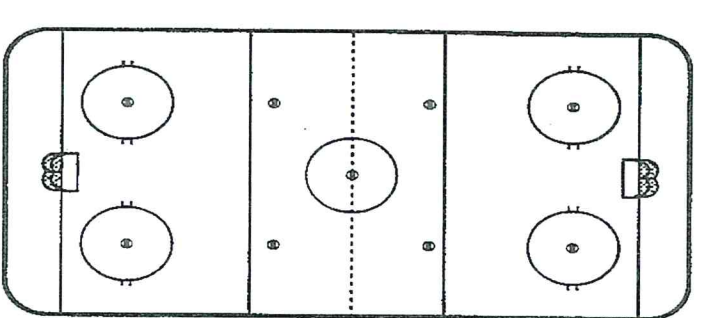
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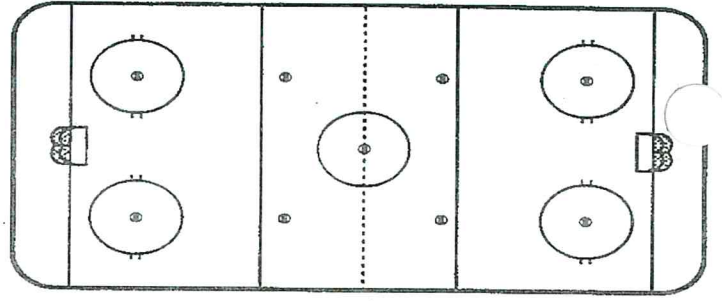
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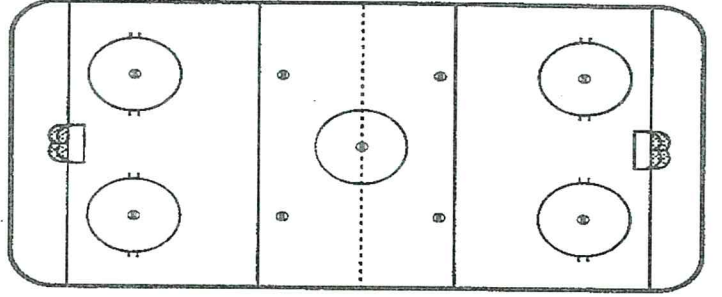
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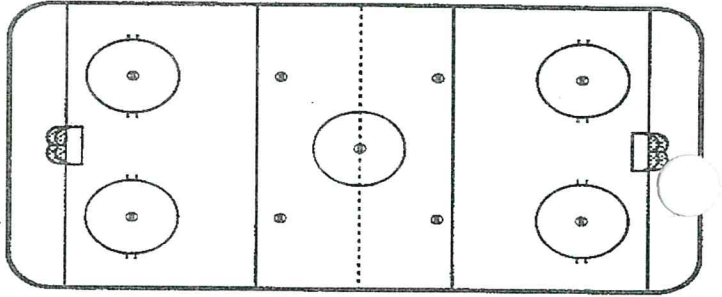
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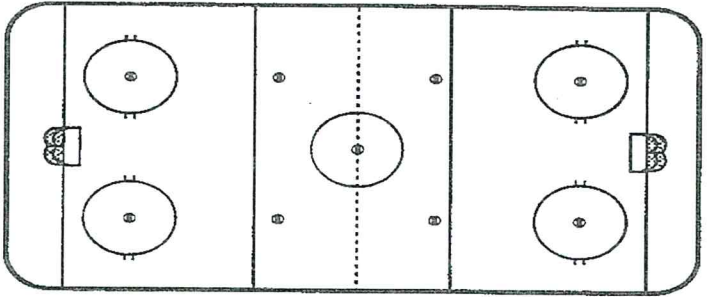
TIME	DESCRIPTION	KEY POINTS



TIME	DESCRIPTION	KEY POINTS



TIME	DESCRIPTION	KEY POINTS



Notes:
