

DATE 12/21/2011

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029837

APPLICANT MIKE TODD PHONE 755-4387
ADDRESS 129 NE COLBURN AVE LAKE CITY FL 32055
OWNER SAMANTHA MANUEL PHONE 386-438-5555
ADDRESS 1911 SW 252 B LAKE CITY FL 32024
CONTRACTOR MIKE TODD PHONE 755-4387
LOCATION OF PROPERTY 90 WEST, S 247, R TROY RD, L 252-B, 2ND HOME ON LEFT

TYPE DEVELOPMENT ADDITION TO SFD ESTIMATED COST OF CONSTRUCTION 12000.00
HEATED FLOOR AREA 240.00 TOTAL AREA 240.00 HEIGHT 10.00 STORIES 1
FOUNDATION WOOD WALLS FRAMED ROOF PITCH 5'12 FLOOR WOOD
LAND USE & ZONING RSF-2 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 1 FLOOD ZONE X SP DEVELOPMENT PERMIT NO.

PARCEL ID 10-4S-16-02862-118 SUBDIVISION CHIPDALE ESTATES
LOT 18 BLOCK PHASE UNIT TOTAL ACRES 1.25

CGC006209
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING CITY BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS:
Check # or Cash 14949

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by
Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by
Framing date/app. by Insulation date/app. by
Rough-in plumbing above slab and below wood floor date/app. by Electrical rough-in date/app. by
Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by Pool date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
Pump pole date/app. by Utility Pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by
Reconnection date/app. by RV date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 60.00 CERTIFICATION FEE \$ 1.20 SURCHARGE FEE \$ 1.20
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 137.40
INSPECTORS OFFICE CLERKS OFFICE

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."
EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.
The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

Columbia County Building Permit Application

For Office Use Only		Application # <u>1112-41</u>	Date Received <u>12-19-11</u>	By <u>LH</u>	Permit # <u>29837</u>
Zoning Official <u>RLK</u>	Date <u>21 Dec 2011</u>	Flood Zone <u>X 5A</u>	Land Use <u>Res Low Dens</u>	Zoning <u>RSF-2</u>	
FEMA Map # <u>N/A</u>	Elevation <u>N/A</u>	MFE <u>N/A</u>	River <u>N/A</u>	Plans Examiner <u>T.G.</u>	Date <u>12-21-11</u>
Comments _____					
<input type="checkbox"/> NOC <input checked="" type="checkbox"/> EH <input type="checkbox"/> Deed or PA <input checked="" type="checkbox"/> Site Plan <input checked="" type="checkbox"/> State Road Info <input checked="" type="checkbox"/> Well letter <input type="checkbox"/> 911 Sheet <input type="checkbox"/> Parent Parcel # _____ <input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input checked="" type="checkbox"/> F W Comp. letter					
IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____ School _____ = TOTAL (Suspended) <input checked="" type="checkbox"/> App Fee Paid					

Mike Todd updates

Septic Permit No. City Water & Sewer Fax 755-1220

Name Authorized Person Signing Permit Mike Todd Phone 755-4387

Address 129 NE Colburn Ave Lake City FL

Owners Name Samantha Manuel Phone 386-458-5155

911 Address 1911 SW 252B Lake City FL

Contractors Name Mike Todd Phone 755-4387

Address 129 NE Colburn Ave Lake City FL

Fee Simple Owner Name & Address Sama

Bonding Co. Name & Address NA

Architect/Engineer Name & Address NA

Mortgage Lenders Name & Address NA

Circle the correct power company - FL Power & Light Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 10 45 16 02862-118 Estimated Cost of Construction 14,000.00

Subdivision Name Chippendale Est Lot 18 Block _____ Unit _____ Phase _____

Driving Directions Highway 90 West, South on 247 West on Troy Rd South on 252B - 2 mi house on left

Number of Existing Dwellings on Property 1

Construction of Addition to SFD Total Acreage 1.25 Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 13'

Actual Distance of Structure from Property Lines - Front 50' Side 50' Side 44' Rear 240'

Number of Stories 1 Heated Floor Area 240 Total Floor Area 240 Roof Pitch 5

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction. **CODE:** Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.

ck#

I left a message for Mike on 12-19-11 about VF form



Site Plan 1112-41

Columbia County Building Permit Application

TIME LIMITATIONS OF APPLICATION : An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

TIME LIMITATIONS OF PERMITS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

(Owners Must Sign All Applications Before Permit Issuance.)

Owners Signature

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

Contractor's Signature (Permitee)

Contractor's License Number CGC026209
Columbia County
Competency Card Number 539

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 16 day of 12 2011
Personally known ☒ or Produced Identification ☐

State of Florida Notary Signature (For the Contractor)

SEAL:



NOTICE OF COMMENCEMENT

Tax Parcel Identification Number: _____

Clerk's Office Stamp

Inst: 201112019733 Date: 12/27/2011 Time: 9:53 AM
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B: 1226 P: 2644

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description):
a) Street (job) Address: 1911 SW CR 252 B Lake City FL
2. General description of improvements: Den Addition
3. Owner Information
a) Name and address: Samantha Manuel Same as above
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____
4. Contractor Information
a) Name and address: Mike Todd 123 NE Colburn Ave Lake City FL
b) Telephone No.: 386 755 4387 Fax No. (Opt.): 386 755 1220
5. Surety Information
a) Name and address: N/A
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.): _____
6. Lender
a) Name and address: N/A
b) Phone No.: _____
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
a) Name and address: Mike Todd 123 NE Colburn Ave Lake City FL
b) Telephone No.: 386 755 4387 Fax No. (Opt.): 386 755 1220
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.): _____

9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

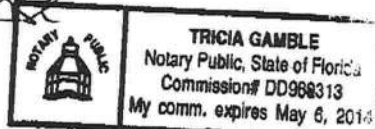
Samantha Manuel
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
Samantha Manuel
Printed Name

The foregoing Instrument was acknowledged before me, a Florida Notary, this 20 day of December, 2011, by:
Samantha Manuel as _____ (type of authority, e.g. officer, trustee, attorney fact) for _____ (name of party on behalf of whom instrument was executed).

Personally Known ☐ OR Produced Identification ☒ Type FL Drivers License

Notary Signature

Notary Stamp or Seal:



11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing (in line #10 above.)

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Mike Todd PHONE 755-4387

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ok

ELECTRICAL 871	Print Name <u>Dennis Conklin</u>	Signature <u>[Signature]</u>
	License #: <u>EC13003800</u>	Phone #: <u>623 1890</u>
MECHANICAL/A/C	Print Name _____	Signature _____ Phone #: _____
PLUMBING/GAS	Print Name _____	Signature _____ Phone #: _____
ROOFING 539	Print Name <u>Mike Todd</u>	Signature <u>[Signature]</u>
	License #: <u>CGC006209</u>	Phone #: <u>386 755 4387</u>
SHEET METAL	Print Name _____	Signature _____ Phone #: _____
FIRE SYSTEM/SPRINKLER	Print Name _____	Signature _____ Phone #: _____
SOLAR	Print Name _____	Signature _____ Phone #: _____

need both Insurance updates

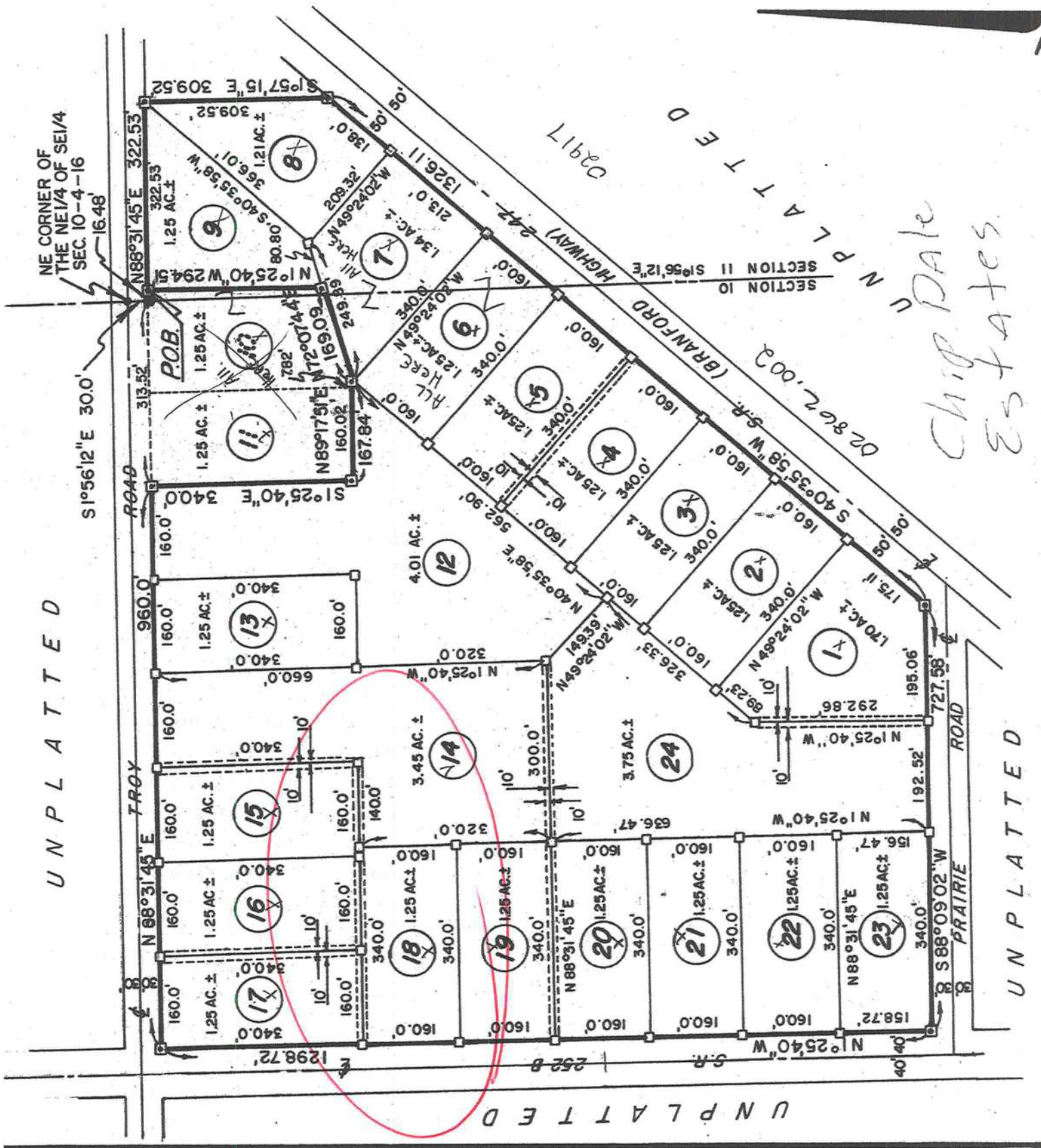
ok

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER	<u>000310</u>	<u>Larry Parrish</u>	<u>[Signature]</u>
FRAMING	<u>CGC006209</u>	<u>Mike Todd</u>	<u>[Signature]</u>
INSULATION	<u>1111</u>	<u>Mike Todd</u>	<u>[Signature]</u>
STUCCO			
DRYWALL	<u>CGC6209</u>	<u>Mike Todd</u>	<u>[Signature]</u>
PLASTER			
CABINET INSTALLER			
PAINTING	<u>CGC006209</u>	<u>[Signature]</u>	<u>[Signature]</u>
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING	<u>710</u>	<u>Brown Vann</u>	<u>[Signature]</u>
ALUM/VINYL SIDING	<u>CGC006209</u>	<u>Mike Todd</u>	<u>[Signature]</u>
GARAGE DOOR			
METAL BLDG ERECTOR			

not renewed

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

5



Prepared by and return to:

Richard D. Zasada, Esq.,
123 East Howard Street
Live Oak, Florida 32064

Inst. 201012014337 Date: 9/7/2010 Time: 9:39 AM

Doc Stamp-Deed: 0.70

DC, P. DeWitt Cason, Columbia County Page 1 of 1 B:1200 P:2329

QUIT CLAIM DEED

THIS QUIT CLAIM DEED executed this 7 day of Sept 2010, by WOODROW MANUEL, JR., a married man, whose address is 346 Gordon Street, St. George, Georgia, 31562, first party, to SAMANTHIA ROSE MANUEL, a married woman, whose address is 1911 SW CR 252B, Lake City, Florida 32024, and party:

WITNESSETH, that the first party, for and in consideration of the sum of Ten and No/100 Dollars (\$10.00), and pursuant to the Martial Settlement Agreement in Case No.: not avail paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quit claim unto the second party forever, all right, title, interest, claim and demand which the first party has in and to the following described real property in the County of Columbia, State of Florida:

LOT 18, CHIPDALE ESTATES, A SUBDIVISON ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 5, PAGE 28, PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

TOGETHER WITH A 1994 LIBERTY DOUBLEWIDE MOBILE HOME WITH IDENTIFICATION NUMBERS 10L23583U LOCATED THEREON AND CONSIDERED A PART THEREOF.

PARCEL NO.: R02862-118

TO HAVE AND TO HOLD the same together with all and singular the appurtenances belonging or appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit of the second party forever.

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first above written.

Donna H. Kennon

Witness

Rayna R. Davis

Witness

Woodrow Manuel, Jr.
WOODROW MANUEL, JR.

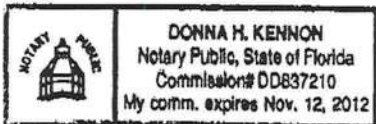
STATE OF FLORIDA
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 7th day of September 2010 by WOODROW MANUEL, JR., a married man, who is personally known to me or has provided valid Florida driver's license as identification.

Donna H. Kennon

Notary Public

My Commission expires: 11/12/2012



© CAM110M01 S CamaUSA Appraisal System Columbia County
11/29/2011 11:45 **Property Maintenance** 14960 Land 002 *
Year T Property Sel 35771 AG 000 *
2012 R 10-4S-16-02862-118 * 6004 Bldg 001 *
Owner MANUEL SAMANTHIA R Conf 56735 Xfea 005
Addr 1911 SW CR 252B HX TOTAL B*
-Cap?- Total Acres
SOH 10% ApYr ERnwl ARnwl Notc
City,St LAKE CITY FL Zip 32024 Y Y 2009
Country (PUD1) (PUD2) (PUD3) MKTA06
SplT/Co JVChgCd pud4 pud5 pud6
Appr By DF Date 1/10/2008 AppCode UseCd 000200 MOBILE HOME
TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp
003 10416.03 06 HX 25000
CHIPDALE
House# 1911 Street COUNTY ROAD 252B MD Dir SW #
City LAKE CITY Zip
Subd N/A Condo .00 N/A
Sect 10 Twn 4S Rnge 16E Subd Blk Lot
Legals LOT 18 CHIPDALE ESTATES ORB 809-2181, WD 1048-1093
WD 1147-2219, QC 1173-953 & QC 1200-2329
Map# Mnt 9/16/2010 LARRY
F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

PRODUCT APPROVAL SPECIFICATION SHEET**Location:** _____**Project Name:** _____

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit on or after April 1, 2004. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung	Alenco	Aluminum Window	10351.1 1163170
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			
2. Soffits			
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles			
2. Underlayments			
3. Roofing Fasteners			
4. Non-structural Metal Rf			
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			



02/02/04 - 1 of 2

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives - Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other <i>Metal</i>	<i>Gulf Coast</i>	<i>29 ga. Color</i>	<i>1165110</i>
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1. <i>Vinyl Siding</i>	<i>Kaykan</i>	<i>Vinyl Siding</i>	<i>12192</i>
2.			



The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection.

[Signature]
Contractor or Contractor's Authorized Agent Signature

Mark Todd *12/19/11*
Print Name Date

Location