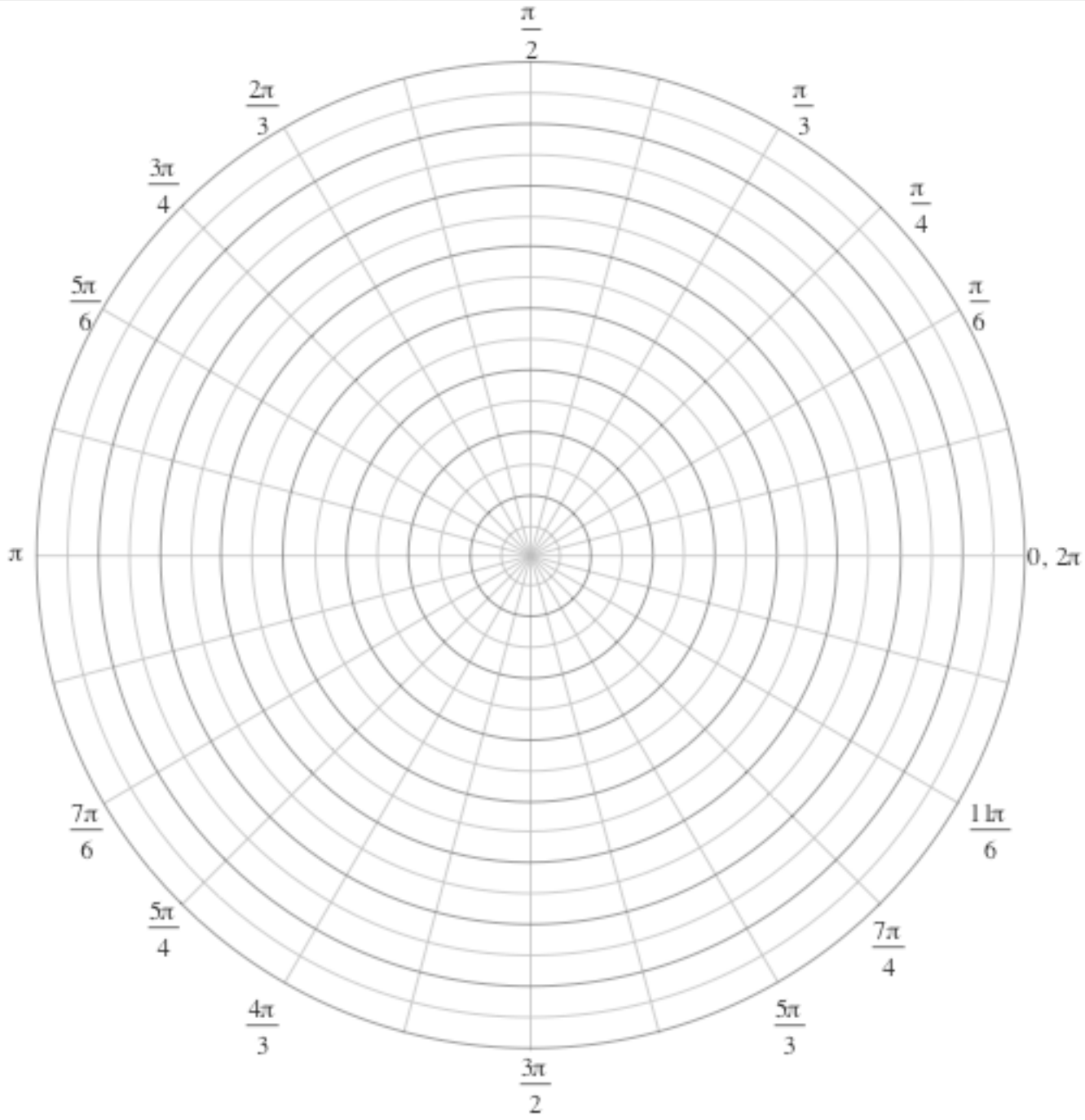Name: Description:	Section/Page Numbers:	Problems:	Date:	Page /