APPROVAL REQUIRED

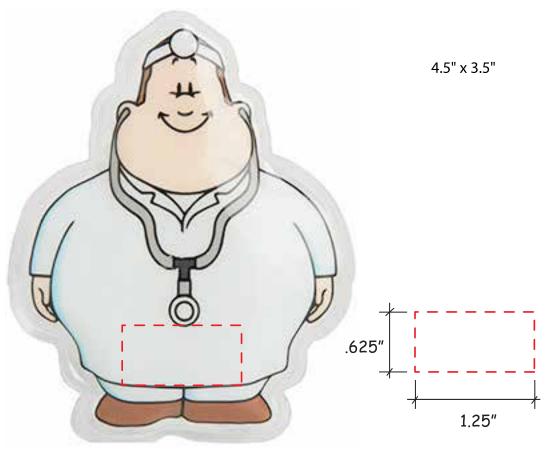
Please confirm the following are correct:

Imprint Color(s)
Spelling
Imprint Size(s)
Imprint Location(s)

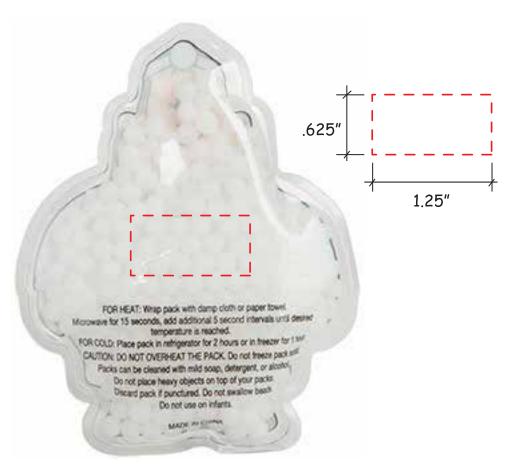
If changes are required, please advise us by email. By approving this proof, you are authorizing us to print your order.

RJ018 DOCTOR

IMPRINT COLOR:



Location 1



Location 2