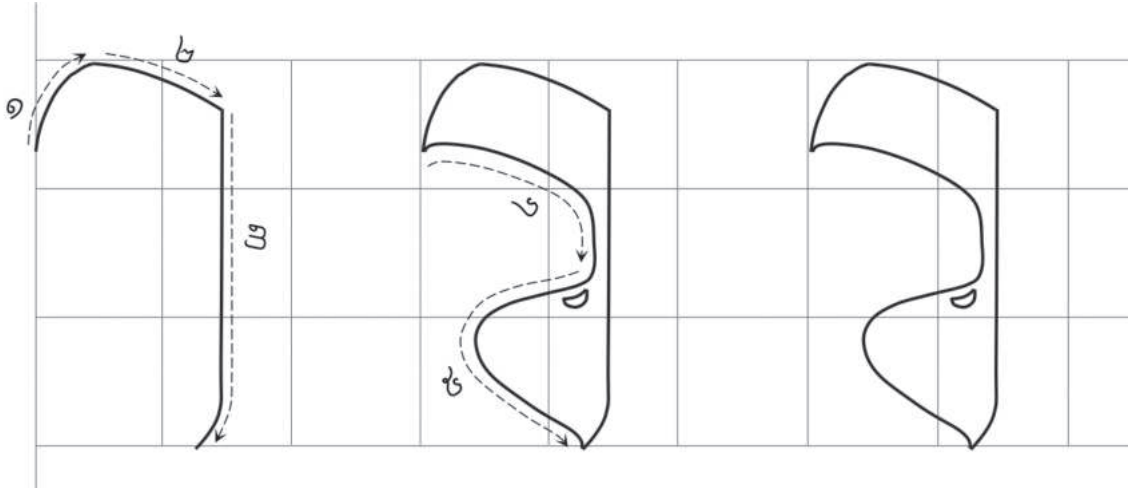


Your name: _____

Date: ____ / ____ / ____



តម្រៀមចម្លាក់ គ្រូ: (អរ)



លំហាត់ធ្លាក់ស្រ: (អរ)
