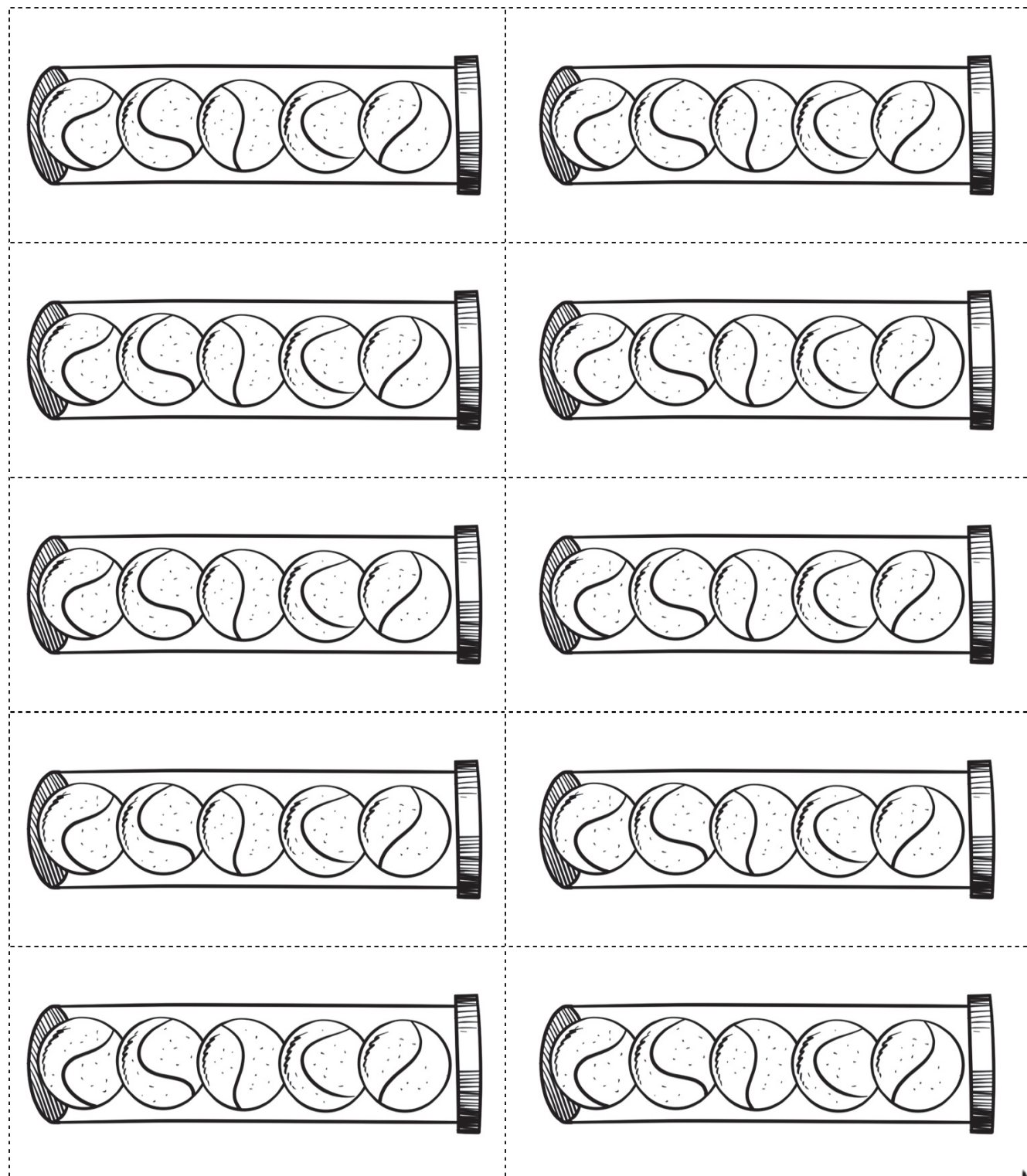


Name _____ Date _____

Intervention: Master 42a

On and Off the Shelf Cards



Name _____ Date _____

Intervention: Master 42b

On and Off the Shelf Cards

