

Return Information

CAUTION

- Form 990-N. Form 990-N (e-PostCard) has been prepared for electronic filing. Some states may require a paper version of Form 990, 990-EZ or 990-PF to be attached to the state return or filed in lieu of a state return. This should be reviewed accordingly. Note that no other federal forms or attachments can be electronically filed with Form 990-N. (26026)

INFORMATIONAL

- Electronic Filing. The following EFIN 230748 is being used to electronically file Form 990-N (e-Postcard). Be sure that this EFIN is listed in the IRS database and is in accepted status for processing of Exempt Organization returns. The IRS Ogden help desk (866 255-0654) may be contacted to update this EFIN for electronic filing of Exempt Organization returns if necessary. (37015)
- Electronic Filing. The following Name Control COMM has been computed and is being used to electronically file Form 990-N (e-Postcard) for COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY. This Name Control is used to match the organization's Name and EIN with the IRS e-File database. If this information does not match the IRS database the return will be rejected and must be corrected before being resubmitted. The IRS help desk (800 829-4933) may be contacted to verify the information in the e-File database. If the Name Control cannot be computed correctly because the organization's name shown on Form 990-N (e-Postcard) does not match the IRS database it can be overridden on the Electronic Filing worksheet, General Information section, Organization name control - override field. (37026)
- Electronic Filing. Form 990-N (e-Postcard) has been selected for electronic filing. The data that is displayed on Form 990-N (e-Postcard) Summary will be contained in the electronically filed return. No attachments or supporting documents or forms are allowed to be electronically filed with Form 990-N. Form 990-N (e-Postcard) Summary is for review purposes only, it is NOT a paper fileable form. (39521)
- Electronic Filing. Preparer's email notification has been selected for Form 990-N (e-Postcard) and will be sent to the following email address: mmuchow@wkco.com (37632)
- Pennsylvania. Form BCO-10. The question for "is any person compensated for soliciting contributions in Pennsylvania" has been answered "Yes" on the Form BCO-10 worksheet, Names and Addresses of All Professional Solicitors section. The return also contains at least one name, address and/or telephone number for professional fundraising counsel on the Form BCO-10 worksheet, Names and Addresses of All Professional Solicitors section. This question can't be answered "Yes" if you use or intend to use professional fundraising counsel. (35705)

Return Information

- . Pennsylvania. Form BCO-10. The question for "has the organization been granted IRS tax-exempt status" has been answered "Yes" on the Form BCO-10 worksheet, Form BCO-10 General Information section accordingly. If the organization has been granted IRS tax-exempt status, please submit a copy of IRS exemption letter with the return if it has not been previously submitted to the Pennsylvania Department of Revenue. (35901)
- . Pennsylvania. Form BCO-10. The question(s) for "any other officer, director trustee or employee", "any officer, agent, or employee of any professional fundraising counsel or solicitor under contract with organization", and/or "any supplier or vendor providing services" has been answered "Yes" on the Form BCO-10 worksheet, Related Officers, Directors, Trustees or Employees section. Since at least one of the question(s) has been answered "Yes", please attach a list of related individuals with name, business, and residence address of the related parties. (35911)
- . Pennsylvania. Form BCO-10. The organization's "gross contributions" of \$ 73,520 is more than \$25,001, but less than \$100,000, therefore internally prepared, compiled, reviewed or audited financial statements must be submitted with the Form BCO-10. (35915)

Electronic Filing History and Return Results

Taxing Authority FEDERAL Form 990-N	Prior Export	Current Export
Date Time Release Number Taxable Income Tax Refund / Balance Due		
		11/14/2019
		11:46:52
		2018.05000
		0.
		0.
		0.

Taxing Authority Form	Prior Export	Current Export
Date Time Release Number Taxable Income Tax Refund / Balance Due		

Taxing Authority Form	Prior Export	Current Export
Date Time Release Number Taxable Income Tax Refund / Balance Due		

Taxing Authority Form	Prior Export	Current Export
Date Time Release Number Taxable Income Tax Refund / Balance Due		

Taxing Authority Form	Prior Export	Current Export
Date Time Release Number Taxable Income Tax Refund / Balance Due		

2018 Return Summary

COMMUNITY WAREHOUSE PROJECT OF CHESTER
COUNTY

61-1658782

	FEDERAL	PENNSYLVANIA
FORM NAME	990-N	FORM BCO-10
E-FILE REQUESTED	YES	NO **
DUE DATE	01/15/20	01/15/20
EXTENDED DUE DATE		
DIRECT DEPOSIT	N/A	N/A
ELECTRONIC WITHDRAWAL	N/A	N/A
DATE CALCULATED	12/04/19	12/04/19
TIME CALCULATED	08:27:58	08:27:58
RELEASE VERSION	2018.05000	2018.05000
DATE EXPORTED	11/14/19	
TIME EXPORTED	11:46:52	
EXPORT VERSION	2018.05000	

** NOT AVAILABLE FOR E-FILE

WOOLARD KRAJNIK MASCIANGELO LLP
CERTIFIED PUBLIC ACCOUNTANTS
50 WEST WELSH POOL ROAD
EXTON, PA 19341
610-363-5200

December 4, 2019

COMMUNITY WAREHOUSE PROJECT OF CHESTER
COUNTY
P.O. BOX 218
WEST CHESTER, PA 19381

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY :

Enclosed is the organization's 2018 Exempt Organization return.

Form 990-N (e-Postcard) has been filed electronically. There is no paper equivalent for this form, however, a summary worksheet is provided for review purposes.

A copy of the Form 990-N summary worksheet return is enclosed for your files. We suggest that you retain this copy indefinitely.

Very truly yours,

WOOLARD KRAJNIK MASCIANGELO LLP

WOOLARD KRAJNIK MASCIANGELO LLP
CERTIFIED PUBLIC ACCOUNTANTS
50 WEST WELSH POOL ROAD
EXTON, PA 19341
610-363-5200

December 4, 2019

COMMUNITY WAREHOUSE PROJECT OF CHESTER
COUNTY
P.O. BOX 218
WEST CHESTER, PA 19381

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY :

We have prepared and enclosed your 2018 Pennsylvania Charitable Organization Registration Statement. The report should be signed, dated, and mailed as indicated.

PENNSYLVANIA FORM BCO-10:

The Pennsylvania Form BCO-10 should be mailed on or before January 15, 2020 to:

Bureau of Charitable Organizations
207 North Office Building
Harrisburg, PA 17120

Enclose a check or money order for \$100, payable to Commonwealth of Pennsylvania.

The report should be signed and dated by the authorized individual(s).

A completed and signed copy of federal Form 990-N (e-Postcard) (and all applicable attachments) must be included with Form BCO-10.

A copy of the Form 990-N summary worksheet return is enclosed for your files. We suggest that you retain this copy indefinitely.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Very truly yours,

WOOLARD KRAJNIK MASCIANGELO LLP

WOOLARD KRAJNIK MASCIANGELO LLP
CERTIFIED PUBLIC ACCOUNTANTS
50 WEST WELSH POOL ROAD
EXTON, PA 19341
610-363-5200

December 4, 2019

COMMUNITY WAREHOUSE PROJECT OF CHESTER
COUNTY
P.O. BOX 218
WEST CHESTER, PA 19381

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY :

Enclosed are the original and one copy of the 2018 Exempt Organization returns, as follows...

Form 990-N (e-Postcard) Summary

2018 Pennsylvania Form BCO-10

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Very truly yours,

WOOLARD KRAJNIK MASCIANGELO LLP

Form 990-N (e-Postcard) Summary
(THIS IS NOT A FILEABLE FORM - FOR REVIEW PURPOSES ONLY**)**

Tax period beginning 09/01/2018 and ending 08/31/2019

Organization's legal name
COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

Employer ID number
61-1658782

Other names used by organization (DBA)

NONE

Number and street (or P.O. box, if applicable)
P.O. BOX 218

Room/Suite

Telephone number
484-473-4360

City or town, state or country and ZIP + 4
WEST CHESTER, PA 19381

Web address, if applicable **COMMUNITYWAREHOUSEPROJECT.COM**

Check if organization is not a 509(a)(3) supporting organization and its gross receipts meets limits for the tax year

Check if organization is terminating (going out of business)

Information regarding principal officer:

Name
VALERIE JESTER

Street address
P.O. BOX 218

City, state or country and ZIP + 4
WEST CHESTER, PA 19381

Mail to:

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
207 North Office Building
Harrisburg, PA 17120

See www.dos.pa.gov/charities for more information

Charitable Organization Registration Statement

BCO-10 (rev. 8/2017)

Fee: See instructions

Read all instructions prior to completing form.

Certificate number: 40793
(N/A if initial registration)

Fiscal year ended: 08/31/2019
MM DD YYYY

FEIN: 61-1658782

If this is a voluntary registration, check and complete the applicable box(es). For a registration to be voluntary, at least one of the following must apply:

Organization is exempt from registration because

Organization does not solicit contributions in Pennsylvania

1. Legal name of organization: COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

Check if name change and give previous name _____

2. All other names used to solicit contributions: _____

3. Contact person: VALERIE JESTER Contact's E-mail: _____

4. Physical address of organization: _____ Mailing address: (If different than physical) _____

P.O. BOX 218

WEST CHESTER

PA 19381

County: CHESTER

Phone number: 484-473-4360

800 number: _____

Fax number: _____

Email (if different than Contact's email): _____

Website: COMMUNITYWAREHOUSEPROJECT.COM

5. Type of organization (e.g. non-profit corporation, unincorporated association, etc.):
NON-PROFIT CORPORATION

Where established: PENNSYLVANIA

Date established:* 10/13/2011

*Initial registrants must submit copies of organizational documents such as charter, articles of incorporation, constitution or other organizational instrument and by-laws.

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

6. Name and addresses of all offices, chapters, branches, auxiliaries, affiliates or other subordinate units located in Pennsylvania, which share in the contributions or other revenue raised in the Commonwealth: (Attach a separate sheet if necessary)

NONE

7. Short form registration applicability - Specified types of charitable organizations described in §162.7(a) of the Act may file a short form registration, which permits the organization to register without filing a financial report. Check the section that describes the organization. If the organization does not meet any of the criteria below for short form registration, check "Not Applicable":

§162.7(a)(1) - Persons or organizations which solicit contributions for the relief of a specific individual, when all of the contributions collected are turned over to the named beneficiary for his/her use without any deductions and provided that all contributions collected shall be held in trust

§162.7(a)(2) - Organizations which only solicit within the membership of the organization by other members of the organization. The term "membership" shall not include those persons who are granted a membership solely upon making a contribution as the result of solicitation. "Member" means a person having membership in a nonprofit corporation, or other organization, in accordance with the provisions of its articles of incorporation, bylaws or other instruments creating its form and organization and having bona fide rights and privileges in the organization such as the right to vote, to elect officers and directors, to hold office or position as ordinarily conferred on members of such organizations.

§162.7(a)(3) - Organizations which receive gross contributions of no more than \$25,000 per fiscal year whose fundraising activities are carried on only by volunteers, members, officers or permanent employees and only permanent employees are compensated for those fundraising activities

§162.7(a)(4) - Veterans organizations chartered under Federal law, organizations of volunteer firemen, ambulance associations, rescue squad associations and their auxiliaries or affiliates, which are not exempt from registration, did not receive gross contributions in excess of \$100,000 and did not use a professional solicitor.

Not Applicable

Charitable organizations which check boxes §162.7(a)(1) - §162.7(a)(4) are not required to file a financial report with this registration. If "Not Applicable" is checked, the charitable organization must submit financial reports which are audited, reviewed, compiled or internally prepared. See Instructions.

Items 8 and 9 are required to be completed by initial registrants only

8. Date organization first solicited contributions from Pennsylvania residents: _____
MM DD YYYY
Other _____

9. If organization solicited Pennsylvania residents and received gross* contributions totaling more than \$25,000 in any given fiscal year, provide the date the organization first received contributions totaling more than \$25,000.

MM DD YYYY
Other _____

*Includes contributions received both within and outside Pennsylvania before any deductions or expenses.

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

10. Has the organization been granted IRS tax-exempt status? Yes No

A. If "Yes," under which IRS code section: 501(C)(3) and attach a copy of the IRS exemption letter if not previously submitted.

B. Has the organization's tax-exempt status ever been denied, revoked or modified? Yes No (If "Yes," attach a copy of the denial, revocation or modification and subsequent reinstatement, if any, and if not previously submitted.)

11. Was the organization required to file any type of IRS 990 return, including 990, 990EZ, 990PF or 990N and applicable schedules, for its most recently completed fiscal year? Yes No

(If "Yes," attach a copy of the most recently filed 990, 990EZ, 990PF or 990N and include all schedules. If "No," attach an explanation of why the organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return or an organization that files a 990N, 990EZ or 990PF, must file a Pennsylvania public disclosure form (BCO-23).)

12. Manner in which contributions are solicited (e.g. direct mail, telephone, internet, etc.):

DIRECT MAIL, E-MAIL, WORD OF MOUTH AND FUNDRAISERS

13. A clear description of the specific programs for which contributions are used or will be used, and a statement describing whether such programs are planned or in existence.

THE COMMUNITY WAREHOUSE PROJECT DEPENDS ON PEOPLE FROM THE LOCAL COMMUNITY TO VOLUNTEER, PROVIDE DONATIONS, INCLUDING FURNITURE, HOUSEHOLD GOODS AND FUNDS. FREE FURNITURE IS THEN PROVIDED TO FAMILIES AND INDIVIDUALS WHO ARE FINANCIALLY UNABLE TO AFFORD THEIR OWN NEW OR USED FURNITURE. OUR VOLUNTEERS HELP US COLLECT AND DISTRIBUTE THIS FURNITURE AND HOUSEHOLD GOODS.

14. Is the organization registered to solicit contributions in any other state or municipality?

Yes No (If "Yes," list all states and municipalities. Attach a separate sheet if necessary.)

15. Is any person compensated, or does the organization intend to compensate any person, who solicits contributions in Pennsylvania, including, but not limited to, employees of the organization and professional solicitors? (Do not check "Yes" if the organization only uses or intends to only use a professional fundraising counsel.) Yes No

If "Yes," give the date the person or entity started or will start soliciting contributions from Pennsylvania residents: 11/15/2017
Month Day Year

16. Names, addresses, and telephone numbers of all professional solicitors the organization uses or intends to use to solicit contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates Pennsylvania residents were first solicited, or will be solicited: (Attach a separate sheet if necessary)

SEE STATEMENT 1

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

- 17. Names, addresses, and telephone numbers of all professional fundraising counsel the organization uses or intends to use to provide services with respect to the solicitation of contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates services began, or will begin, with respect to soliciting contributions from Pennsylvania residents: (Attach a separate sheet if necessary)

SEE STATEMENT 2

- 18. Names, addresses, and telephone numbers of any commercial coventurers under contract with the organization: (Attach a separate sheet if necessary)

NONE

- 19. If the registering charity is a parent organization located in Pennsylvania, does the organization elect to file a combined registration covering all of its Pennsylvania affiliates?

(See note "Affiliate and Parent Organization") Yes No Not Applicable

If "Yes," give all names and certificate numbers of the affiliate organizations:

(Each affiliate whose parent organization files an IRS 990 group return must submit a copy of the parent organization's 990 group return and file a public disclosure form (BCO-23) for each affiliate.)

- 20. Is the registering charity a Pennsylvania affiliate of a parent organization, which elected to file a combined registration on the registering charity's behalf? (See note "Affiliate and Parent Organization")

Yes No Not Applicable

If "Yes," provide the name and, if available, certificate number of the parent organization.

(Each affiliate whose parent organization files an IRS 990 group return must submit a copy of the parent organization's 990 group return and file a public disclosure form (BCO-23) for each affiliate.)

Legal name of parent organization

Pennsylvania certificate number

- 21. Provide the names and addresses of all officers, directors, trustees and principal salaried executive staff officers. (Attach separate sheet if necessary. A reference to the 990 or the BCO-23 is not sufficient.)

SEE STATEMENT 3

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

22. Names of the individuals or officers of the organization who: (Attach a separate sheet if necessary)

A. Are in charge of solicitation activities:

GLEND A BRION

B. Have final responsibility for the custody of contributions:

VALERIE JESTER

C. Have final responsibility for final distribution of contributions:

VALERIE JESTER

D. Are responsible for custody of financial records:

VALERIE JESTER

23. Are any officers, directors, trustees, or employees related by blood, marriage, or adoption to:

A. Any other officer, director, trustee, or employee? Yes No **SEE STATEMENT 4**

B. Any officer, agent, or employee of any professional fundraising counsel or solicitor under contract with organization? ** Yes No

C. Any officers, agents or employees of any supplier or vendor providing goods or services? **

Yes No

** (this includes any officer, director, trustee, or employee of the charitable organization who is also an officer, director, trustee, employee or owner of a professional fundraising counsel, professional solicitor, supplier or vendor)

If "Yes" is checked to any of the above, attach a list of related individuals including names, business, and residence addresses of related parties.

24. Has the organization or any of its present officers, directors, executive personnel or trustees ever:

A. Been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets or been enjoined from soliciting contributions or currently has such proceedings pending in this or any other jurisdiction? Yes No

B. Had its registration or license to solicit contributions denied, suspended, or revoked by any governmental agency?

Yes No

C. Entered into any legally enforceable agreement (such as a consent agreement, an assurance of voluntary compliance or discontinuance or any similar agreement) with any district attorney, Office of Attorney General, or other local or state governmental agency? Yes No

(If "Yes" is checked in response to any of the above, attach a written explanation, including the reasons for actions, and copies of all relevant documents.)

COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

Certification - This registration statement must be signed by two different officers of the organization, one of whom shall be the chief fiscal officer or the equivalent.

I certify that the information provided in this registration, including all statements and attached documentation, is true and correct to the best of my knowledge, information and belief. I understand that the falsification of any statement or documentation made is subject to the penalties of 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities) and 10 P.S. §162.17 (relating to administrative enforcement and penalties).

Signature of Chief Fiscal Officer

Date

VALERIE JESTER, TREASURER

Type or print name and title of Chief Fiscal Officer

Signature of Other Authorized Officer

Date

Type or print name and title of Other Authorized Officer

Checklist for registration:

- Completed registration statement properly signed and dated.
- A copy of the IRS 990/990EZ/990PF/990N Return and required schedules, signed and dated by an authorized officer
- Public Disclosure Form BCO-23 (if required)
- Applicable Financial Statements (audited, reviewed, compiled or internally prepared)
- Registration fee and any late filing fees
- Initial Registrants Only: IRS determination letter, articles of incorporation or charter and by-laws.

See Instructions for more information on completing this form and attachments.

FORM BCO-10

ALL PROFESSIONAL SOLICITORS

STATEMENT 1

NAME AND ADDRESS

PHONE NUMBER

NONE

CONTRACT BEGIN DATE

CONTRACT END DATE

SOLICIT DATE

FORM BCO-10

PROFESSIONAL FUNDRAISING COUNSELS

STATEMENT 2

NAME AND ADDRESS

PHONE NUMBER

NONE

CONTRACT BEGIN DATE

CONTRACT END DATE

SERVICE DATE

FORM BCO-10

OFFICERS, DIRECTORS, TRUSTEES AND EXECUTIVES

STATEMENT 3

NAME AND ADDRESSTITLE

GLEND A BRION
922 SCONNELLTOWN RD
WEST CHESTER, PA 19382

PRESIDENT

NAME AND ADDRESSTITLE

CATHERINE FRIEDMAN
978 BRINTON'S BRIDGE RD
WEST CHESTER, PA 19382

VICE PRESIDENT

NAME AND ADDRESSTITLE

VALERIE JESTER
510 SUSAN DR
WEST CHESTER, PA 19382

TREASURER

NAME AND ADDRESSTITLE

MARY LATOFF
1110 DEBRA'S WAY
WEST CHESTER, PA 19382

SECRETARY

NAME AND ADDRESSTITLE

DARCIE GOLDBERG
301 ASHBRIDGE ST
WEST CHESTER, PA 19380

DIRECTOR

NAME AND ADDRESSTITLE

ERIC ROSLE
9750 SOUTH PENN DR
WEST CHESTER, PA 19380

DIRECTOR

NAME AND ADDRESSTITLE

JOHN LILLEY
644 SUGARS BRIDGE RD
WEST CHESTER, PA 19380

DIRECTOR

FORM BCO-10

RELATED OFFICER, DIRECTOR, TRUSTEE, EMPLOYEE

STATEMENT 4

NAME AND ADDRESS

GLEND A BIRON

BUSINESS

NAME AND ADDRESS

ERIC ROSLE

BUSINESS

PENNSYLVANIA PUBLIC DISCLOSURE FORM BCO-23

ORGANIZATION NAME: COMMUNITY WAREHOUSE PROJECT OF CHESTER COUNTY

CERTIFICATE NUMBER: 40793

FOR FISCAL YEAR ENDED: 08/31/2019

Part I: Gross Contributions

1) General Contributions	1	71,020.
2) Gross Receipts from Special Events	2	2,500.
3) Contributions from Affiliates	3	0.
4) Contributions Received from Federated Fundraising Organizations	4	0.
5) Receipts from Membership Dues in Excess of Bona Fide Dues	5	
6) Gross Contributions (add lines 1 through 5)	6	73,520.

Part II: Other Income

7) Program Service Revenues	7	
8) Bona Fide Membership Dues and Assessments	8	0.
9) Government Grants and Contracts	9	0.
10) Miscellaneous Income	10	
11) Total Income (add lines 6 through 10)	11	73,520.

Part III: Expenses

12) Program Services	12	32,245.
13) Administrative Expenses	13	7,972.
14) Fundraising Expenses	14	4,173.
15) Payments to Affiliated Organizations	15	0.
16) Other Expenses from Special Events (other than fundraising expenses)	16	0.
17) Miscellaneous Expenses	17	0.
18) Total Expenses (add lines 12 through 17)	18	44,390.

Part IV: Net Assets

19) Excess or (Deficit) for the Year (subtract line 18 from line 11)	19	29,130.
20) Net Assets or Fund Balances at Beginning of Year	20	8,861.
21) Other Changes in Net Assets or Fund Balances (attach explanation)	21	
22) Net Assets or Fund Balances at End of Year (combine lines 19, 20, and 21)	22	37,991.

(See Next Page for "Salaries and Expense Allowance Statement")

SALARIES AND EXPENSE ALLOWANCE STATEMENT

Report salaries paid and expenses allowed to the five highest paid employees. Additionally, include salaries paid and expenses allowed to any and all compensated officers of the organization.

23) Salaries and Expense:

Name of Individual	Title and Average Hours Per Week Devoted to Position	Salary	Expense Account and Other Allowances
<i>Five Highest Paid Employees:</i>			
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
 <i>Officers:</i>			
GLENDA BRION	PRESIDENT 45.00	10,520.	0.
CATHERINE FRIEDMAN	VICE PRESIDENT 0.00	0.	0.
VALERIE JESTER	TREASURER 0.00	0.	0.
MARY LATOFF	SECRETARY 0.00	0.	0.
_____	_____	_____	_____
_____	_____	_____	_____
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