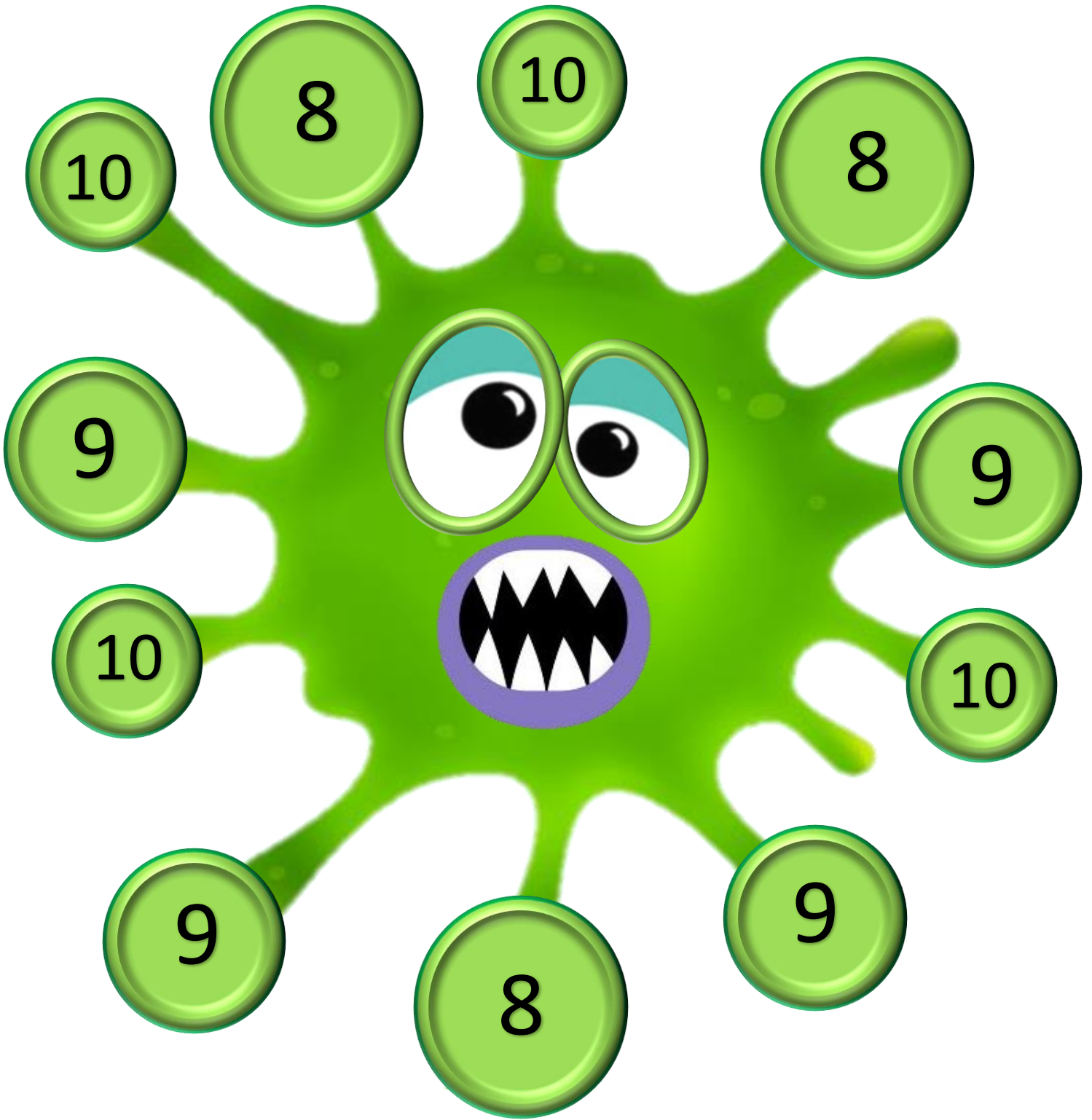


# Practise Target



INITIALS & SURNAME:

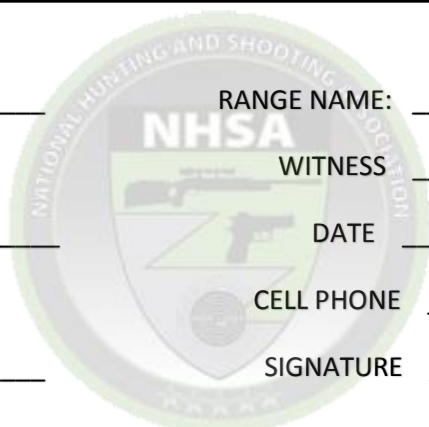
\_\_\_\_\_

DATE:

\_\_\_\_\_

FIREARM TYPE & CALIBRE

\_\_\_\_\_



RANGE NAME:

\_\_\_\_\_

WITNESS

\_\_\_\_\_

DATE

\_\_\_\_\_

CELL PHONE

\_\_\_\_\_

SIGNATURE

\_\_\_\_\_