

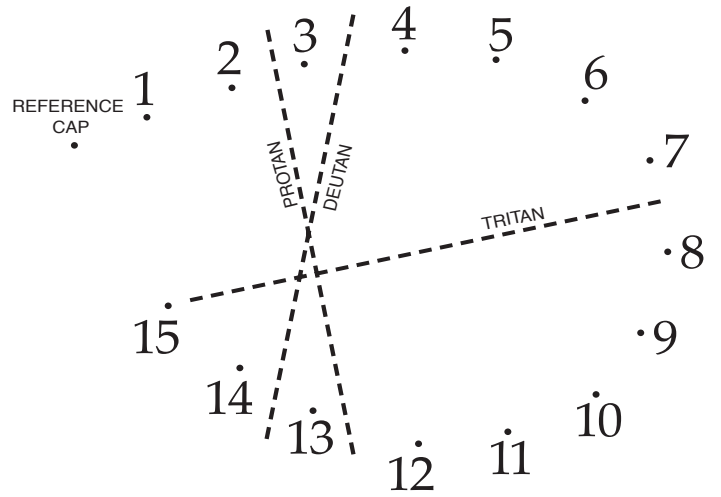
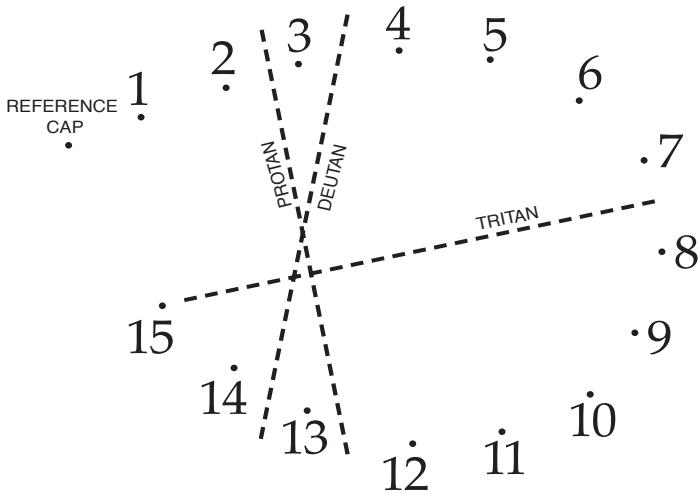
Name _____ Age _____ Date _____

File No _____ Dept _____ Tester _____

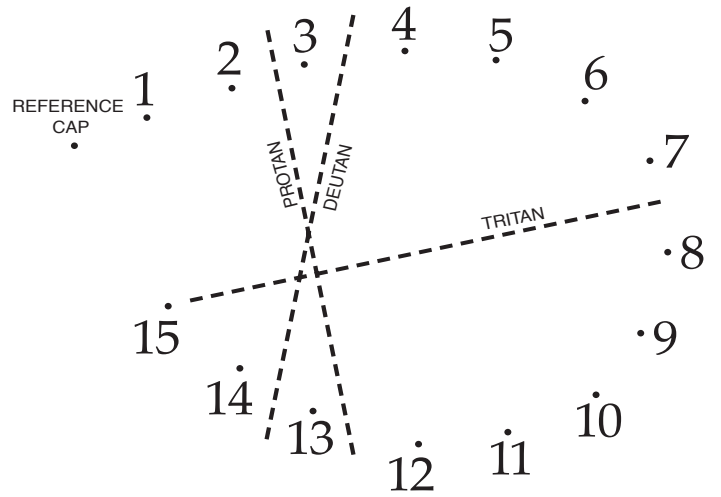
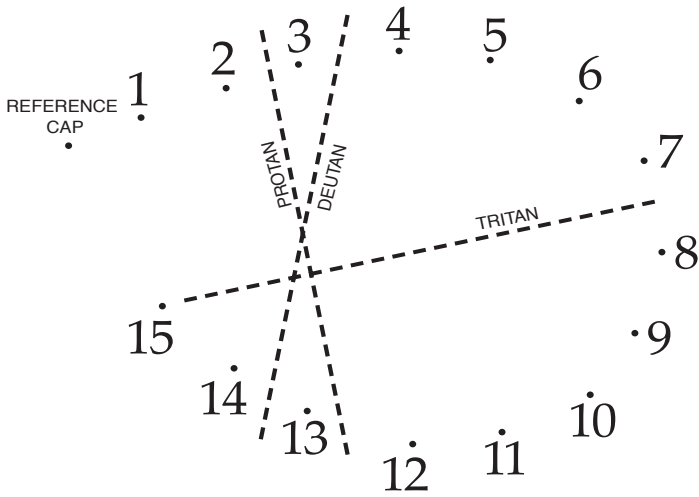
OD

OS

Farnsworth D-15 Test



Lanthony Desaturated 15 Hue Test



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