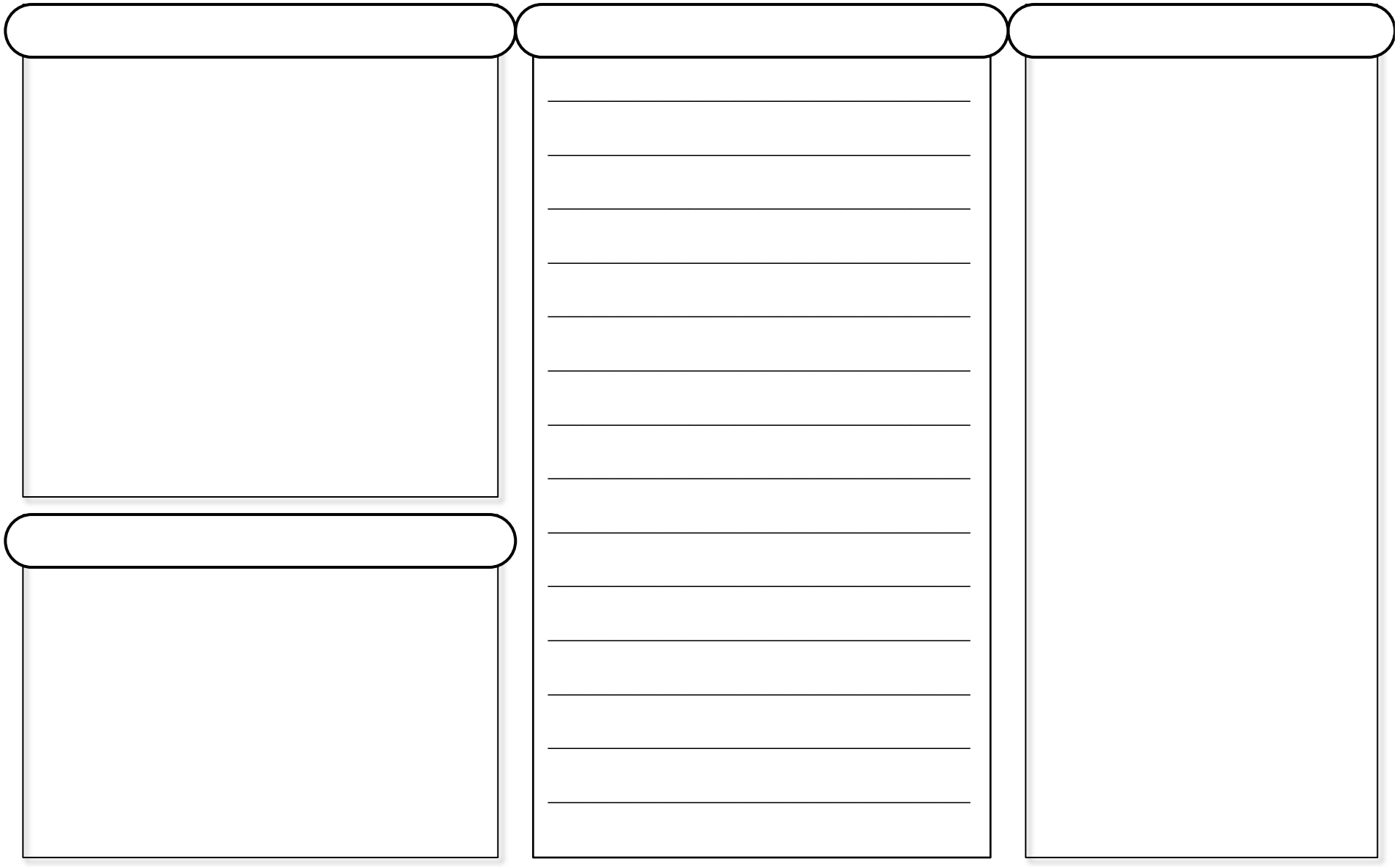
NAME:

Topic: