

III. Dolphin Cay Property Owners Association (DCPOA) Sample Forms

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DOLPHIN CAY PROPERTY OWNERS ASSOCIATION, INC.
 4779 Dolphin Cay Lane S.
 St. Petersburg, FL 33711
 727-864-1900

REQUEST FOR APPROVAL OF IMPROVEMENTS: Condominium Units Form 1

Date _____ Owner's Name _____ Phone _____

Address _____ Building _____ Unit _____

I request approval to install, at my own expense, one of the following types of improvements with the understanding that the installations will be in compliance with the specifications, special instructions, and/or comments listed. **Any contractor used must be licensed, insured, and will obtain any permits that may be necessary.**

The contractor utilized will be responsible for the cleanup and disposal offsite (i.e., not in building dumpsters) of any debris in the building common areas and in the parking lot. Elevators used for moving equipment, supplies, or debris must be padded.

***NOTE:** No unit owner will make any alteration or improvement to his or her unit, except interior painting and decoration, unless he or she has first obtained approval in writing from the Board and the ARC. If the unit owner has received approval, then the unit owner may make such alteration or improvement at his or her sole and personal expense, provided all work is done without disturbing the rights of other unit owners; and providing the unit owner makes no changes or alterations to any interior boundary wall, exterior wall, balcony, patio, screening, exterior door, window, structural or load bearing member, electrical service, or plumbing service; and further provided that all alterations and improvements are in compliance with all existing building codes.*

SELECT ONLY ONE ITEM PER REQUEST FORM PLEASE

VERANDAH/BALCONY FLOORING: Floor covering is to be neutral in color to blend in or to complement exterior building colors. **A sample of the floor covering must be submitted with the form.** A waterproofing membrane is required to be laid down first and then balcony floors are to be sealed. White J-bead must be applied to the balcony edge. Balcony floors are to be sealed. A waterproofing membrane is a thin layer of watertight material that is to be laid over a surface. This layer is continuous and does not let water pass through it. For example, on a flat terrace a waterproofing membrane could be laid above the structural slab and below the finish tiles. **Information describing your waterproofing membrane must be included with your request for improvements.**

HURRICANE SHUTTERS/SCREENS: Installation contractor _____
 A recorded indemnification agreement must accompany this request for approval. A copy of the hurricane shutter installation specifications will be provided with request of this form. A copy of the hurricane shutter installation specifications must be provided to the installation contractor. Location drawings and shutter specifications as well as any additional information, e.g., product brochure, must be provided at form submission. Shutters and frames must be white or match the building color. Screen mesh must be black or charcoal. **Shutters and screens must be mounted inside veranda horizontal transoms.**

RETRACTABLE OVERHEAD SCREENS: Installation contractor _____
 A recorded indemnification agreement must accompany this request for approval. A copy of the retractable overhead screen specifications will be provided with request of this form. Location drawings as well as any additional information, e.g., product brochure, must be provided at form submission. Frames must be white or match the building color. Screen mesh must be black or charcoal. **Screens must be mounted inside veranda horizontal transoms**

 Unit Owner's Signature

(unsigned forms will not be processed)

CONDOMINIUM ASSOCIATION RESPONSE: APPROVED DISAPPROVED

Signature Association Title Date

COMMENTS _____

ARC RESPONSE: APPROVED DISAPPROVED

Signature Title Date

COMMENTS _____

DCPOA RESPONSE: APPROVED DISAPPROVED-

Signature Title Date

COMMENTS _____



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REQUEST FOR APPROVAL OF IMPROVEMENTS: Condominium Units Form 2

Date _____ Owner's Name _____ Phone _____

Address _____ Building _____ Unit _____

I request approval to install, at my own expense, one of the following types of improvements with the understanding that the installations will be in compliance with the specifications, special instructions, and/or comments listed. **Any contractor must be licensed, insured, and will obtain any permits that may be necessary.**

The contractor utilized will be responsible for the cleanup and disposal offsite (i.e., not in building dumpsters) of any debris in the building common areas and in the parking lot. Elevators used for moving equipment, supplies, or debris must be padded.

***NOTE:** No unit owner will make any alteration or improvement to his or her unit, except interior painting and decoration, unless he or she has first obtained approval in writing from the Board and the ARC. If the unit owner has received approval, then the unit owner may make such alteration or improvement at his or her sole and personal expense, provided all work is done without disturbing the rights of other unit owners; and providing the unit owner makes no changes or alterations to any interior boundary wall, exterior wall, balcony, patio, screening, exterior door, window, structural or load bearing member, electrical service, or plumbing service; and further provided that all alterations and improvements are in compliance with all existing building codes.*

SELECT ONLY ONE ITEM PER REQUEST FORM PLEASE

- SCREEN/STORM DOOR:** Screen door must be 1-1/4–2 inch heavy gauge aluminum frame with a white* baked enamel factory finish and an automatic door closure. Screen and glass may be interchangeable. If a keyed lock is on the door, individual condominium association key policy must be followed. A picture of the door to be attached to request form and descriptive literature is required. ARC approved doors are as follows: Larson-Classic Elegance Series & Classic View Series, Anderson-HD 2500 & HD 3500.

*Dominica building doors must be hunter green baked enamel finish. Antigua, Bermuda, Curacao, and Osprey Pointe residents may choose a hunter green or white baked enamel finish.

- WINDOW FILM:** Window tinting is to be clear or neutral gray and non-reflective. A sample and descriptive literature is to be attached to the request form. Film must be repaired or replaced if any bubbling, cracking, or peeling occur.

- SATELLITE DISH:** Installation contractor _____
A recorded indemnification agreement must accompany this request for approval. A copy of the satellite dish specifications will be provided with request of this form. Location drawings as well as any additional information, e.g., product brochure, must be provided at form submission.

Unit Owner's Signature
(unsigned forms will not be processed)

CONDOMINIUM ASSOCIATION RESPONSE: *APPROVED* *DISAPPROVED*

Signature Association Title Date

COMMENTS _____

ARC RESPONSE: *APPROVED* *DISAPPROVED*

Signature Title Date

COMMENTS _____

DCPOA RESPONSE: *APPROVED* *DISAPPROVED*

Signature Title Date

COMMENTS _____



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REQUEST FOR APPROVAL OF IMPROVEMENTS: Condominium Units Form 3

Date _____ Owner's Name _____ Phone _____

Address _____ Building _____ Unit _____

I request approval to install, at my own expense, one of the following types of improvements with the understanding that the installations will be in compliance with the specifications, special instructions, and/or comments listed. **Any contractor must be licensed, insured, and will obtain any permits that may be necessary.**

The contractor utilized will be responsible for the cleanup and disposal offsite (i.e., not in building dumpsters) of any debris in the building common areas and in the parking lot. Elevators used for moving equipment, supplies, or debris must be padded.

NOTE: No unit owner will make any alteration or improvement to his or her unit, except interior painting and decoration, unless he or she has first obtained approval in writing from the Board and the ARC. If the unit owner has received approval, then the unit owner may make such alteration or improvement at his or her sole and personal expense, provided all work is done without disturbing the rights of other unit owners; and providing the unit owner makes no changes or alterations to any interior boundary wall, exterior wall, balcony, patio, screening, exterior door, window, structural or load bearing member, electrical service, or plumbing service; and further provided that all alterations and improvements are in compliance with all existing building codes.

SELECT ONLY ONE ITEM PER REQUEST FORM PLEASE

- WINDOWS & GLASS DOORS:** Installation contractor _____
A recorded indemnification agreement must accompany this request for approval. A copy of the window and door installation specifications will be provided with request of this form. In addition, a copy of the window and door installation specifications must be provided to the installation contractor. Location drawings and manufacturer's window and door specifications as well as any additional information, e.g., product brochure, must be provided at form submission. **NOTE: For units 101-110, all floor-mounted fasteners can have no more than 3/4 inch maximum penetration.**

- INTERIOR FLOORING:** All new underlayment, with the exception of carpet, will have a minimum soundproofing IIC of 71. Carpeting will remain at a minimum of 50 IIC. **A sample of floor covering and underlayment must be submitted with this request.**

- BALCONY FAN:** Installation on rear balcony only. Color will be white. Fan must have a minimum down shaft of 1" and installed with isolation pads. Any light fixture attachment must be equipped with white or frosted lens/globe. Unit must be designed for outdoor use.

Unit Owner's Signature
(unsigned forms will not be processed)

CONDOMINIUM ASSOCIATION RESPONSE: APPROVED DISAPPROVED

Signature Association Title Date

COMMENTS _____



ARC RESPONSE: APPROVED DISAPPROVED

Signature Title Date

COMMENTS _____



DCPOA RESPONSE: APPROVED DISAPPROVED

Signature Title Date

COMMENTS _____





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 727-864-1900

REQUEST FOR APPROVAL OF IMPROVEMENTS: Condominium Units Form 4

Date _____ Owner's Name _____ Phone _____

Address _____ Building _____ Unit _____

I request approval to install, at my own expense, one of the following types of improvements with the understanding that the installations will be in compliance with the specifications, special instructions, and/or comments listed. **Any contractor must be licensed, insured, and will obtain any permits that may be necessary.**

The contractor utilized will be responsible for the cleanup and disposal offsite (i.e., not in building dumpsters) of any debris in the building common areas and in the parking lot. Elevators used for moving equipment, supplies, or debris must be padded.

NOTE: No unit owner will make any alteration or improvement to his or her unit, except interior painting and decoration, unless he or she has first obtained approval in writing from the Board and the ARC. If the unit owner has received approval, then the unit owner may make such alteration or improvement at his or her sole and personal expense, provided all work is done without disturbing the rights of other unit owners; and providing the unit owner makes no changes or alterations to any interior boundary wall, exterior wall, balcony, patio, screening, exterior door, window, structural or load bearing member, electrical service, or plumbing service; and further provided that all alterations and improvements are in compliance with all existing building codes.

SELECT ONLY ONE ITEM PER REQUEST FORM PLEASE

- ELECTRIC GRILL:** Electric grills may be kept on the rear balcony only and be of a design to minimize smoking. Grill users will be mindful of smoke and odor, which may affect neighboring units and will operate grills courteously. Please attach descriptive literature and/or illustration to this form. No gas or charcoal grills are allowed.
- DOORBELL:** Will be battery operated and wireless with a white or ivory finish.
- OTHER ALTERATIONS:** (e.g., kitchen cabinets, countertops, plumbing modifications and fixtures, electrical work, appliance additions/modifications, floorplan alterations, etc.)

 Unit Owner's Signature
(unsigned forms will not be processed)



CONDOMINIUM ASSOCIATION RESPONSE: APPROVED DISAPPROVED

Signature Association Title Date

COMMENTS _____

ARC RESPONSE: APPROVED DISAPPROVED

Signature Title Date

COMMENTS _____

DCPOA RESPONSE: APPROVED DISAPPROVED

Signature Title Date

COMMENTS _____



DOLPHIN CAY PROPERTY OWNERS ASSOCIATION, INC.
4779 Dolphin Cay Lane S.
St. Petersburg, FL 33711
727-864-1900

REQUEST FOR APPROVAL OF IMPROVEMENTS: Single Family Homes Form

Date _____ Owner's Name _____ Phone _____

Address _____ Lot _____

I request approval to install, at my own expense, one of the following types of improvements with the understanding that the installations will be in compliance with the specifications, special instructions, and/or comments listed. **Any contractor must be licensed, insured, and will obtain any permits that may be necessary.**

The contractor utilized will be responsible for the cleanup and disposal offsite (i.e., not in dumpsters on the premises).

NOTE: There will not occur any construction of a building, structure, swimming pool, fence, wall, major change of landscaping, driveway, sidewalk, or any other improvement to a lot, unless first reviewed and approved in writing by the ARC. Furthermore, there must not be any addition, modification, or alteration to any building or structure visible from the exterior of such structure or building, including, but not limited to, any change of paint color, change of roof tiles, or additions of any awning, canopy, shutter, screens, security bars, and all window covering unless reviewed and approved, in writing, by the ARC.

SELECT ONLY ONE ITEM PER REQUEST FORM PLEASE

REQUEST FOR:

- Addition to Home
- Awnings
- Docking Pier
- Exterior Paint
- Landscaping
- Paving
- Pool
- Roofing
- Screens (Retractable or Fixed)
- Storm Shutters
- Window Film
- Other _____

SUBMIT WITH:

- Architectural Drawings & Site Plan
- Color/Style/Material/Location
- Contractor Drawings & Site Plan
- Sample of Color
- Landscape Drawings & Plant Description
- Sample Paver or Tile
- Contractor Drawings & Site Plan
- Sample of Roof Tile
- Contractor Drawings & Specifications
- Contractor Drawings & Specifications
- Sample Film

Lot Owner's Signature
(unsigned forms will not be processed)

ARC RESPONSE: APPROVED DISAPPROVED

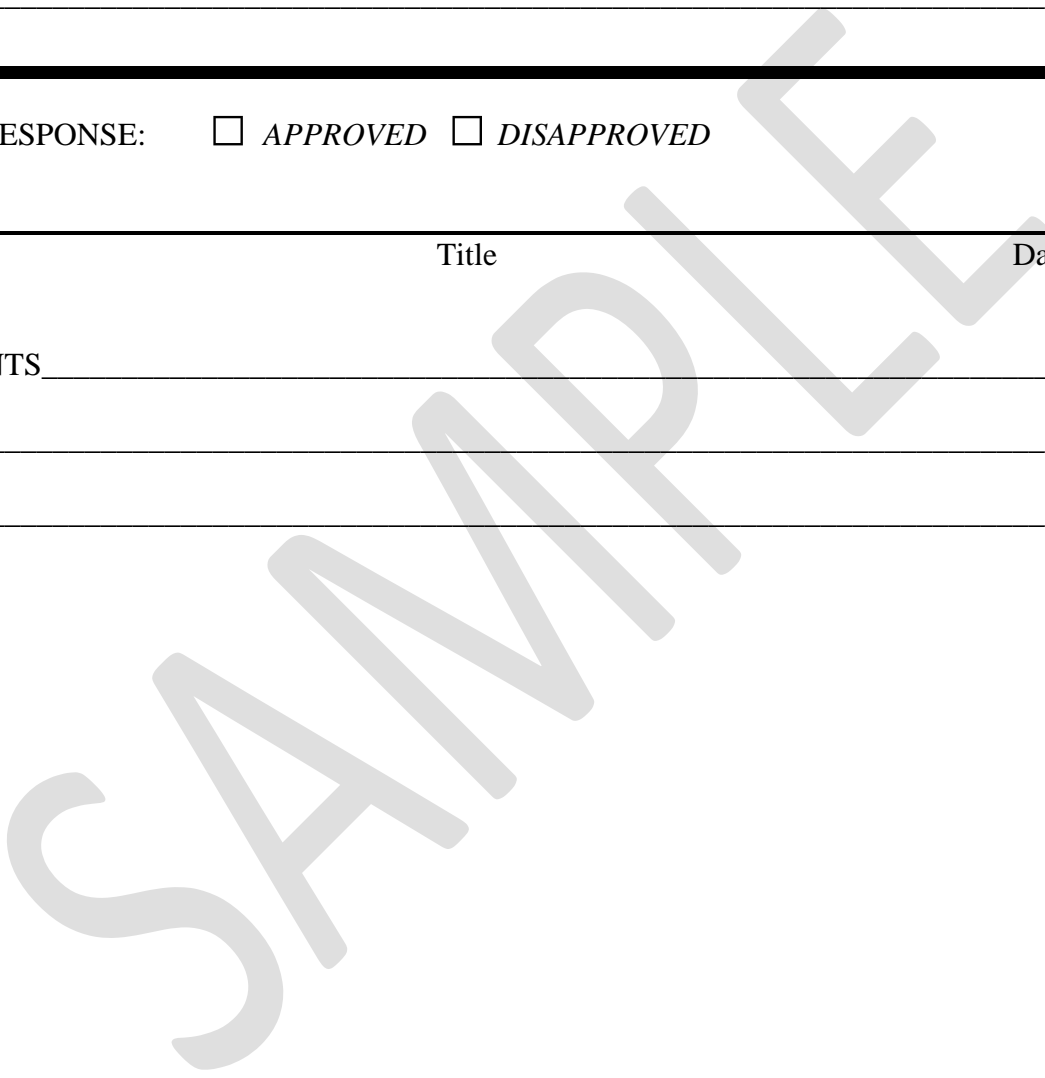
Signature Title Date

COMMENTS _____

DCPOA RESPONSE: APPROVED DISAPPROVED

Signature Title Date

COMMENTS _____





DOLPHIN CAY PROPERTY OWNERS ASSOCIATION, INC.
 4779 Dolphin Cay Lane S.
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CONTRACTOR RULES

Conduct

INT

- Contractors must abide by all city, county, and federal building codes.
- Dolphin Cay requires refraining from smoking, profanity, loitering in common areas, and playing loud music.

Permissible Work Hours

INT

- Work may be performed within normal business hours, **8:00 a.m. to 4:00 p.m., Monday through Friday. Only quiet work is allowed from 8:00 a.m. to 4:00 p.m. on Saturdays. No Sundays or Holidays.**
- Emergency work is allowed at any time.

Vehicles

INT

- **No contractor vehicles are to use the circle for any reason.** Oversized vehicles must be parked on the street and not in the parking lot.
- **Pass must be displayed on dashboard at all times.**

Elevators

INT

- Elevator pads must be put in the elevator prior to any material or tools being brought into or out of the unit.
- Elevator pads are put up at 8:00 a.m. and taken down at 4:00 p.m., Monday through Friday. **There is a \$50.00 charge for pads left up from 4:00 p.m. to 6:00 p.m. for deliveries outside of the working day.**
- Key to lock down the elevator is available from the office with a \$25.00 refundable deposit. A key will not be available for single-elevator buildings.

Structural Modifications

INT

- All floor or load-bearing wall penetrations to the existing floor slab and/or structural steel must be approved by the ARC and Management Office, e.g., plumbing lines, electrical conduits, floor cores, A/C, shutter and sliding door installations, etc.
- In units 101 to 110, all floor-mounted fasteners must have an embedment of ¾" maximum.

Working Conditions and Debris Removal

INT

- **Protective covering must be used to avoid damaging or soiling the walkway carpet and other common areas.**
- For work performed on balconies, plastic coverings are to be installed to protect garage openings and other unit balconies.
- **Do not leave or stage any type of materials or tools in the walkways, lobbies, garages, or parking lots.**
- Cleanup is required in these areas prior to leaving at the end of each day.
- **Luggage carts, shopping carts, and building trash dumpsters are never for contractor use.**
- Any contractors needing to station an open-top dumpster must receive permission from the Management Office.
- Building doors are never to be propped open. Obtain a key from the owner, or use the intercom for entry.

The cost of repairing damage done to Common Elements or the property of other residents is the responsibility of the owner and contractor doing the work.

Contractor and owner/resident signatures constitute acceptance of the above terms:

Contracting Firm: _____ Date: _____
 Contractor Name: _____ Building/Unit #: _____
 Contractor Phone: _____ Owner/Resident: _____
 Contractor Signature: _____ Owner/Resident Signature: _____

SAMPLE

SAMPLE

AFFIDAVIT & INDEMNIFICATION Contractor's use of Balconies

This is to verify that I have given my permission for the owners of Unit # _____ Bldg. _____ and/ or their contractor _____ to access my balcony for the purpose of installing _____ (hurricane shutters, windows).

The owner requesting installation and/or contractor will provide me with a schedule for installation (including dates) prior to any work being started.

Further the owner requesting and/or contractors understand that they will be held responsible for any clean up and/ or damages to my balcony due to negligence by the contractor.

Signature of Owner granting permission: Unit & Bldg. _____
_____ Date: _____

Signature of Contractor:

Date: _____

Signature of Owner requesting access to balcony:

Date: _____

Final Inspection

This is verify that the above mentioned work has been completed and that upon final inspection, there was:

- No damage to my balcony Minimal damage which has been corrected.
 Damage still has not been corrected, the outstanding issues are

Signature of Owner: _____
Signature of Contractor: _____

Date: _____
Date: _____

SAMPLE

SAMPLE



DOLPHIN CAY PROPERTY OWNERS ASSOCIATION, INC.
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PET REGISTRATION

Date _____ Name _____

Unit/Lot _____ Association _____

Condominium Unit Owners

Declaration of Condominium XIV 14.3

(b): One pet will be allowed for owner-residents only, provided the pet's weight at maturity is thirty pounds or less. Unit owners are allowed one additional pet provided the total combined weight of both pets at maturity does not exceed thirty pounds.

Single Family Lot Owners

Declaration of Covenants Article VIII 8.2.6: No more than two pets will be permitted on any lot, provided that the total combined weight of both pets does not exceed forty pounds.

Pet 1

Type of pet (dog/cat) _____ Name of Pet _____

Breed _____ Color/Markings _____

Pet 2

Type of pet (dog/cat) _____ Name of Pet _____

Breed _____ Color/Markings _____

VETERINARIAN CERTIFICATION
 (to be completed by unit/lot owner's veterinarian)

I, _____, a licensed veterinarian practicing at _____
Print Name Name of Facility

hereby certify that on _____ pet 1 _____ pet 2 _____
Date Name Name

Owned by _____

Pet 1: Weight _____ lbs. _____ oz. Pet 2: Weight _____ lbs. _____ oz.

 Veterinarian's Signature

SAMPLE



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OVERNIGHT GUEST INFORMATION

The purpose of this form is to collect information for the DCPOA concerning residents' overnight guests staying in the Dolphin Cay community. This form must be completed prior to issuance of a guest pass. Failure to inform the DCPOA of guests' arrival will result in denial of entry by security.

(Please Print)

Owner Information

Owner's Name _____ Date _____

Unit _____ Building Name _____

Lot _____ Lot Address _____

Expected Guest(s)

Name(s) _____

Name(s) of children _____ Ages _____

Arrival Date _____ Departure Date _____

Vehicle Information (May be completed by Security Officer at time of guests' arrival)

_____ Year _____ Make _____ Model _____ Color _____

License Plate _____ State _____

Requirements

An owner or resident is obligated to inform his or her guests that they must abide by existing Rules and Regulations of the community and make a copy of the rules available to their guests. Owner/residents are responsible for the conduct of their guests. Guests of condominium residents are to park their vehicles in the outside unmarked parking spaces or in the garage space assigned to the unit they are visiting. A pass must be on the dashboard of the guest's vehicle at all times while on the property at Dolphin Cay. By signing below, owner/resident gives his or her assurance that the visitors registered above are guests and that no rental agreement exists relative to this occupancy.

Owner/Resident's Signature _____ Date _____

Provided to Security by _____ Date _____

SAMPLE



DOLPHIN CAY PROPERTY OWNERS ASSOCIATION, INC.
4779 Dolphin Cay Lane S.
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CHANGE OF ADDRESS

Building (Circle One): A B C D E F G or LOT _____

Unit _____

Name _____

Effective Date Of Change _____

Send All Mail To

Name _____

Street Address _____

City _____ State _____ ZIP _____

Phone _____

OFFICE USE ONLY

DATE RECEIVED: _____

*Note: This is not a change of address form for the United States Postal Service.
Please obtain PS Form 3575 from your local Post Office.*

SAMPLE

DOLPHIN CAY BICYCLE REGISTRATION FORM

Please complete the registration form below and return it to the Office. You will be issued an identification tag to be placed on your bicycle in a prominent location. Bicycles may be stored in the racks provided in the garage, within the condominium owner's unit or storage room, or in areas designated by your Association.

Note: bicycles not properly tagged or stored on the common elements will be removed.

Association: _____

Building _____ Unit#: _____

Name: _____

Phone: _____

1.	_____	_____
	Bicycle Model / Color	Tag #
2.	_____	_____
	Bicycle Model / Color	Tag #
3.	_____	_____
	Bicycle Model / Color	Tag #
4.	_____	_____
	Bicycle Model / Color	Tag #
5.	_____	_____
	Bicycle Model / Color	Tag #

SAMPLE



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MEMORIAL AND HONORARIUM PROGRAM DESCRIPTION

Is there a special person, place, or organization you would like to honor or pay tribute? Would you like that tribute to enhance the quality of life for residents of Dolphin Cay? If so, this information may be of interest to you. It summarizes the policy of the DCPOA regarding donations and briefly describes the procedure involved.

Donations

The intent of donations (other than purely monetary donations) should enhance the natural beauty of Dolphin Cay and increase the opportunity for residents to enjoy the many activities and natural areas within the community's boundaries on areas of common property.

Recognition

Your gift or donation may be recognized in one or more of the following ways, if you choose: the name(s) may be inscribed on the gift, an acknowledgement in *Currents by the Cay*, the name(s) may be inscribed on a plaque to be displayed on or near the gift.

Procedure

1. A resident is to submit a donation form to the DCPOA stating how they would like the donation to be used.
2. The DCPOA staff will meet with the resident to discuss the type of recognition desired.
3. The request will then be submitted to the DCPOA Board at its next regular scheduled meeting.
4. Upon approval, the Manager will make the necessary arrangement for ordering and delivery of the item. All funds must be forwarded to the DCPOA prior to ordering. Checks will be made payable to the DCPOA once final costs are determined.
5. The DCPOA will maintain the gift. However, because of the need to preserve flexibility in the use and maintenance of all common area, the DCPOA, through the Board, reserves the right to remove or relocate any gift at any time and not replace it. Each donor must acknowledge this understanding by signing the approved donation form.
6. Completed forms should either be mailed to DCPOA, 4779 Dolphin Cay Lane S., St. Petersburg, FL 33711, or dropped off at the Management Office during regular business hours. You will be contacted to discuss the current needs of the DCPOA, type of donation, location, etc.

SAMPLE



DOLPHIN CAY PROPERTY OWNERS ASSOCIATION, INC.
4779 Dolphin Cay Lane S.
St. Petersburg, FL 33711
727-864-1900

MEMORIAL AND HONORARIUM PROGRAM FORM

We wish to make a donation to the DCPOA.

Name _____

Address _____

City, State, Zip _____

In Memory/Honor of _____

Amount of Donation \$ _____

Comments on Desired Use of the Donation _____

We understand that the DCPOA will maintain the gift. The DCPOA reserves the right to remove or relocate any gift at any time and not replace it.

Donor Signature _____ Date _____

////////////////////////////////////
For Office Use Only Below This Line

Meeting with Donor _____

Details of Gift _____

Location of Gift _____

Cost of Gift \$ _____

Type of Recognition _____ Cost of Recognition \$ _____

Payment Received _____

SAMPLE