anadrol

053.314.328-40 Identificação

custom\_dictionaries\_only

custom\_terms\_only

STUDENT TRANSCRIPT

Official Transcript

School's Name School's Complete Address

Student's Name

Student's Social Security Number\_

Student's Address

Street Address

Apt. #

City

State

Zip

Student's Program Title:

Program Title

Enrollment Date Required Hours Completion Date Hours Completed Final Grade Grade Point Average

Number of Transfer Hours (if applicable)

Transfer Hours Accepted From (Name of School and Address)

in Program/Course(s)

Signature of School Official Official’s Title Date Raised Seal of School

A (Excellent)

B (Above Average)

C (Average)

D (Below Average)

F (Failure)

WP - Withdrew Passing WF - Withdrew Failing Inc. - Incomplete

93%-100% 4.0

85%-92% 3.0

75% - 84% 2.0

70% - 74% 1.0

Any grade falling below the school's graduation requirement of 70% (The above sample grades are aligned with recommendations from national accreditating agencies and various state agencies. It is the responsibility of each school to set their grading policy.)

Sample Student Transcript Form/2004

-----BEGIN CERTIFICATE REQUEST-----

MIIByzCCATQCAQAwYjELMAkGA1UEBhMCVVMxETAPBgNVBAgTCE5ldyBZb3JrMRUw

EwYDVQQHEwxQb3VnaGtlZXBzaWUxDDAKBgNVBAoTA0lCTTEMMAoGA1UECxMDVFBG

MQ0wCwYDVQQDEwRFdmFuMIGfMA0GCSqGSIb3DQEBAQUAA4GNADCBiQKBgQCnkt1r

eFpFaWnDkfgFplUVjPzZdWhhJoDODNxg3VX57whCEBAcCxRqSgoIZEJResd47i4M

Hhd1tKNGyHn7oiMROk/wDqyx1CMyqiVXzwiaUNSIc7aXJGqf+UPY/dsq93RC2OY2

8rT++uMLTzWgU+4mMdyHfY7HLoANMaHLJnOjZwIDAQABoCkwEgYJKoZIhvcNAQkC

MQUTA0lCTTATBgkqhkiG9w0BCQcxBhMEZXZhbjANBgkqhkiG9w0BAQQFAAOBgQAZ

qRpqyj4c6/WpT9Vuw3ryWXwcViHR1qQloyNyWj6SC5/xKS+TZEEtTZ5AhCe6Q4V7

2Dr/nkoZRzpHMv5mUtbbKYZZFr6nivk5pl8Bzhd6jZ4hithMN+VzjH42JwCz7Bp+

eR5ARlXmQsq13WmXirAIKuy1DaBW50iOekJJUnYLCg==

-----END CERTIFICATE REQUEST-----Issued by the

District Court Of The United States

Central District Of California

SUBPOENA IN A CIVIL CASE

CASE NUMBER : #03- 5070

Alex Smith

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

v.

Julia Smith

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TO: Keeper of the Records,

United States Geological Survey

151 causeway street ,suite 1001

Boston, massachusetts ,02114-1384.

YOU ARE COMMANDED to appear in the United State District Court of , at the place, date, and

time specified below to testify in the above case.

Place of Testimony : United State District Court

J.W McCormack Post Office and Courthouse

Boston, massachusetts

Courtroom : 6, 15th Floor

Date and Time : Monday June 2016

YOU ARE COMMANDED, at the time of the trial, hearing or deposition described above, to produce and permit inspection

and copying of the following documents or objects (list documents or objects):

YOU ARE COMMANDED, no more than Ten business days after receiving this subpoena, to produce and permit inspection and copying of the following documents or objects (list documents or objects):

Any organization not a party to this suit that is subpoenaed for the taking of a deposition shall designate one or more officers,

directors, managing agents, or other persons who consent to testify on its behalf, and may set forth, for each person designated, the

matters on which the person will testify. Arkansas Rules of Civil Procedure 30(b)(6).

Issuing Officer Signature and Title (Indicate if Attorney for Plaintiff or Defendant)

Date Apr 14, 2016

Issuing Officer’s Name, Address, and Phone Number

Frank Gray,

Street: 516 Route 44

City: Chelsea

State: Massachusetts

Zip Code: 02150

+1-888-452-1505

PROOF OF SERVICE

SERVED : september 10 ,2016 AD

Place : United States Geological Survey

151 causeway street ,suite 1001

Boston, massachusetts ,02114-1384.

Served On (Print Name) : Honarable Paul Neill

Manner of Service : Registered U.S Mail

Serial # RB773293057US

Served By (Print Name) : Alex Smith

Title

DECLARATION OF SERVER

I declare, under penalty of perjury under the laws of the State of Arkansas that the foregoing information

contained in the Proof of Service is true and correct.

Executed on

Date : Apr 14, 2016

Signature of Server :

Street: 260 Redwood Drive

City: Saint Charles

State: Illinois

Zip Code: 60174

Address of Server