	CLASSROOM BUSINESS LICENSE/APPLICATION	
	Date: Applicant (s):	
	Name of Business:	
BUSINESS	Description of Business:	
PLAN	Please be as detailed as possible.	
Signature of owner(s):		
Fee:\$ □ P	aid □Approved □ Rejected	
Comments/Notes:		Signature of bureaucrat
	**Post If Approved**	
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	CLASSROOM BUSINESS LICENSE/APPLICATION	
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The state of the s	Please be as detailed as possible.	
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Comments/Notes:	aid □Approved □ Rejected	Signature of bureaucrat
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	CLASSROOM BUSINESS LICENSE/APPLICATION	
	Date: Applicant (s):	
	Name of Business:	
SUSINESS	Description of Business:	
BUSLAN		
Signature of owner(s):	Please be as detailed as possible.	
	aid □Approved □ Rejected	
Comments/Notes:	.,	Signature of bureaucrat
	**Post If Approved**	