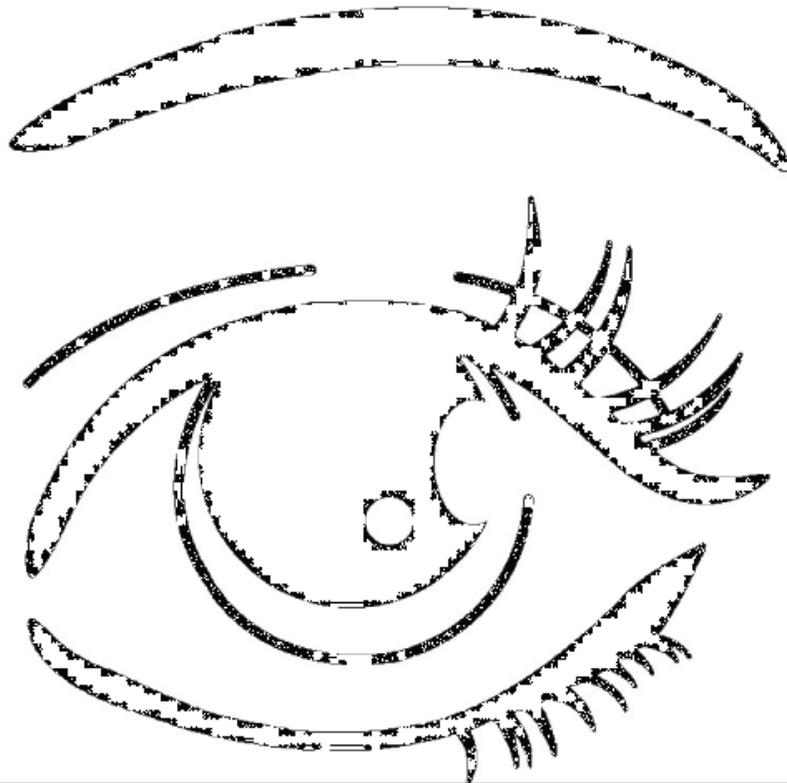


E e *is for*
Eye



Artist Name: _____

4381 Aidan Lane
North Port, FL 34287
941-876-4400
Seeportoptometry.com

SEEPOR

OPTOMETRY
COMPLETE VISION HEALTHCARE

seeportoptometry@gmail.com
Submit entries via email or FB
Deadline: April 18th, 2020