5A STATE POWERLIFTING			**SCHOOL _____**				
TEAM-1ST LIFT FORM			**FAX TO DAN ADELHARDT @KMC**				
WOMEN'S DIVISION				**(316) 636-2437**			
CLASS	ACTUAL BODY	NAME	1ST BENCH	1ST SQUAT	1ST CLEAN		
105							
105							
105							
114							
114							
114							
123							
123							
123							
132							
132							
132							
140							
140							
140							
148							
148							
148							
156							
156							
156							
165							
165							
165							
HWT							
HWT							
HWT							
COACH	SIGNATURE	_____					
ADM.	SIGNATURE	_____					